Dear Colleagues, Friends, and Guests:

AOHC 2017 will be our 102nd annual meeting! For over a century ACOEM has set the standard of excellence in worker and workplace health and safety.

Our AOHC 2017 Planning Committee, chaired by Francesca K. Litow, MD, MPH, MRO, FACOEM, has developed an excellent program featuring a wide variety of educational options and activities. The committee worked hard to offer topics that are important in everyday occupational medicine practice, ensuring that you can gain very practical clinical knowledge. Choose the sessions most beneficial to you, those that will be of most use to enhance your practice. I also urge you to step outside your comfort zone a time or two. Be open-minded about other areas – you never know what might be important to you tomorrow!

Here are just a few conference highlights:

- **Timely education.** We're excited to bring you educational offerings in the areas of OEM clinical practice; management and administration; education and scientific research; environmental health and risk management; and regulatory, military and governmental OEM.

- **The Mile High City, Denver!** The capital of Colorado, Denver is an American metropolis dating to the Old West era. Larimer Square, the city’s oldest block, features landmark 19th-century buildings. Museums include the Denver Art Museum, an ultramodern complex known for its collection of indigenous works, the Denver Museum of Nature and Science, established in 1900 as the source for informal science education in the Rocky Mountain region, and the mansion of famed Titanic survivor Molly Brown. Denver is also a jumping-off point for resorts and activities in the nearby Rocky Mountains.

- **Networking.** Take part in every activity you can to maximize your opportunities! Time after time we hear the leaders in our field say that the connections they made over the years were key factors in their professional success.

- **Sappington Lecturer.** ACOEM past president, Ronald R. Loeppke, MD, MPH, FACOEM, with US Preventive Medicine Inc., will deliver this year’s Sappington lecturer.

In summary, please don’t miss AOHC 2017 in Denver. I look forward to seeing you there when we come together as a specialty.

James A. Tacci, MD, MPH, JD, FACOEM  
President, ACOEM  

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**PRE-AND POST-CONFERENCE COURSES**

**Friday, April 21**
- Medical Center Occupational Health Basics

**Saturday, April 22**
- Business Leadership for Physicians: Necessary Knowledge Not Taught in Medical Schools

**Friday-Saturday, April 21-22 (two-day courses)**
- Medical Review Officer (MRO) Comprehensive
- Foundations of Occupational Medicine
- Occupational Medicine Board Review

**Thursday, April 27**
- Spirometry Testing in Occupational Health – Physician Update
- CAOHC Professional Supervisor Workshop
- Getting Difficult Cases Unstuck: Tactics for Stalled Recovery and Prolonged Work Disability: A Case-Based Approach
### SUNDAY, APRIL 23, 2017 ~ CME: 6.0

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<tr>
<th>Time</th>
<th>Session</th>
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<tr>
<td>7:00am-8:00am</td>
<td>099</td>
<td>New Member Orientation</td>
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<td>9:00am-10:30am</td>
<td>101</td>
<td>Introduction to OEM (for newcomers to occ med only)</td>
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<td>103</td>
<td>Occupational and Personal Risk Factors in Illness and Injury: The NIOSH Compendium Project</td>
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<td>102</td>
<td>Monitoring Longitudinal Lung Function measurements using SPIROLA</td>
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<td>104</td>
<td>Research Laboratory Biohazard Exposure Management</td>
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<td>1:30pm-2:30pm</td>
<td>106</td>
<td>Occupational Dermatoses: What the Occ Doc Needs to Know</td>
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<td>107</td>
<td>Cutting-edge Sustainability Models for Health Care Employers: Delivering well-being to Patients, Employers and the Community</td>
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<td>108</td>
<td>Protecting Health Care Workers in Hospitals: PRO PPE Sentinel Surveillance System for Contagious Pathogens</td>
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<td>109</td>
<td>Cluster Buster: The Approach to Cancer Clusters and the Limitations of Environmental Epidemiology</td>
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<td>2:30pm-2:45pm</td>
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<tr>
<td>2:45pm-3:45pm</td>
<td>110</td>
<td>Becoming and Maintaining Board Certification in OEM</td>
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<td>111</td>
<td>Application of Advanced Neuroscience Theories to the Treatment of Workers with Painful Musculoskeletal Conditions</td>
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<td>112</td>
<td>Using Cutting-edge Informatics Tools to Enhance the Occupational Health Services in Academic Medical Centers</td>
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<td>113</td>
<td>Pregnant Worker: Current Challenges and Current Concepts</td>
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<td>114</td>
<td>Journal Club for the Practicing OEM Physician</td>
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<td>4:00pm-5:45pm</td>
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<td>Exhibit Hall Reception and Abstract Poster Presentations</td>
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<tr>
<td>6:00pm-7:30pm</td>
<td>100</td>
<td>AOHC Opening Session: Induction of New Fellows, C. O. Sappington Lecture, and Awards Presentation</td>
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</table>

**TRACK KEY**
- Other
- Environmental Health and Risk Management
- OEM Clinical Practice
- Management and Administration in OEM
- OEM Education and Scientific Research
- Regulatory, Legal, Military, and Governmental OEM

* Separate registration required; additional fee applies
** Advanced registration required; additional fee applies
### Session 200
**What Constitutes Excellence: The Best Corporate Health and Safety Programs in America**

### Session 201
**Opportunities for Integrating Health and Protection and Health Promotion**

### Session 202
**Becoming an ACOEM Fellow**

### Session 203
**The Independent Medical Examiner**

### Session 204
**ACOEM Legislative and Government Affairs Update**

### Session 205
**Restoring Function and Return-to-Work after Spinal Cord Injury: PEAK Strategies**

**Break (Exhibit Hall)**

### Session 210
**Resident Research Abstract Presentations**

### Session 206
**OEM and Human Factors: Collaborative Efforts and Update**

### Session 207
**What You Can Do with the COHE Model: Implications for Action**

### Session 208
**MRO Controversies**

### Session 211
**OSHA/NIOSH Investigations**

### Session 209
**Back Pain and Work Using Population-based Data from the NHIS**

**Break (Exhibit Hall)**

### Session 210, Continued
**What Physicians Need to Know About Healthcare Ergonomics: Safe Patient Handling and Beyond**

### Session 215
**OEM and Workplace Wellness**

### Session 213
**OEM Physician in the Treatment and Prevention of Climate Change Related Health Problems**

### Session 211, Continued
**Sit vs Stand**

### Session 216
**TED2: The Best of OEM**

### Session 217
**Drug Formularies in Workers’ Compensation**

### Session 218
**The Beryllium Standard: From Science to Policy**

### Session 219
**Compliance, Compassion, and Company**

**Lunch (Exhibit Hall)**

### Session 221
**Creating Your Own OEM Elevator Pitch**

### Session 222
**Opioids and Chronic Pain Management in Colorado**

### Session 223
**Psychological Fitness-for-Duty Toolkit for Occupational Medicine**

### Session 224
**Promising Practices to Promote Commercial Driver Wellness**

### Session 225
**The New OSHA Silica Standards**

### Session 226
**Gulf War Illness**

**Break (Exhibit Hall)**

### Session 227
**ACOEM’s Maintenance of Certification, Part IV**

### Session 228
**So, You Want to Be an ACOEM Leader?**

### Session 229
**Firearm Injury: Facts, Myths, and What the Science Tells Us**

### Session 230
**A Guide for the Primary Care Physician in Evaluating Disocyanate Exposed Workers**

### Session 231
**Conversion Disorder and Functional Neurological Conditions**

### Session 232
**IOMSC: Update and Future Directions**

**7:00pm Offsite Social Event**

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**TRACK KEY**

- **Other**
- **Environmental Health and Risk Management**
- **OEM Clinical Practice**
- **Management and Administration in OEM**
- **OEM Education and Scientific Research**
- **Regulatory, Legal, Military, and Governmental OEM**

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<tr>
<td>7:45am-12:00pm</td>
<td>Worksite Visit 801: Denver Fire Academy Worksite Visit</td>
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<td>8:00am-8:30am</td>
<td>Break (Exhibit Hall)</td>
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<tr>
<td>8:30am-10:00am</td>
<td>Session 304, Commercial Driver Medical Examinations: Where They Are, Where They Are Going</td>
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<td>Session 301, The Ludlow Massacre and Beyond: Occupational Medicine and Corporate Welfare in Early 20th Century Colorado</td>
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<td>Session 302, Drilling Down: US Oil and Gas Extraction Worker Safety and Health Trends and Current Issues</td>
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<td>Session 305, Lead and Beyond: The Global Impact of Regulations, Trade and Company Practice on Population Lead Exposure</td>
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<td>Session 303, Hazardous Drug Workplace Safety and Compliance</td>
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<td>10:30am-12:00pm</td>
<td>Session 304, Continued</td>
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<td>Session 306, Unlearning Self-defeating Thinking Habits: A Proactive Approach</td>
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<td>Session 307, ACOEM Court: You Be the Judge!</td>
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<td>Session 305, Continued</td>
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<td>Session 308, Hazardous Drug Exposure and Medical Surveillance</td>
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<td>12:00pm-1:15pm</td>
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<td>1:30pm-3:00pm</td>
<td>Session 312, Public Safety Medicine Update 2017: The Cutting Edge</td>
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<td>Session 309, Current Issues Affecting the Health and Safety of Underserved Occupational Populations in the US and Abroad</td>
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<td>Session 310, Interaction of Healthcare Worker Health and Safety on Patient Health and Safety</td>
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<td>Session 313, Inhalation Hazards and Respiratory Health Effects from Post 9/11 Deployment to Southwest Asia</td>
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<td>Session 311, Evidence-based Workers’ Compensation (WC) Management</td>
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<td>Break (Exhibit Hall)</td>
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<td>Session 312, Continued</td>
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<td>Session 314, Migration and Work: Underserved Populations in the Americas and the USA</td>
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<td>Session 315, Managing Fitness-for-Duty and Return-to-Work</td>
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<td>Session 313, Continued</td>
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<td>Session 316, Partnering with Workers’ Compensation Insurers to Reach Small Enterprises</td>
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<td>5:15pm-6:15pm</td>
<td>Session 317, Neurological Fitness-for-Duty</td>
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<td>Session 318, Mitigating the Health Risks of Hydrogen Sulfide and Other Workplace Hazards in Oil and Gas Production</td>
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<td>Session 319, Patient Satisfaction Measurement in OEM</td>
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<td>Session 320, US Military OEM Update</td>
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<td>Session 321, Is There a Doctor on Board? Preparing for Airline Medical Events and Emergencies</td>
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| 7:00am-8:00am | **Session 401** Preventing Musculoskeletal Disorders: Screening and Workplace Interventions  
**Session 402** The Role of the Occupational Health Provider in Active Shooter and Bomber Situations  
**Session 403** Getting Your Start in Research  
**Session 404** Better WC Care through Better Documentation and Coding Requirements  
**Session 405** Carbon Monoxide Neurotoxicity |
| 8:00am-10:00am| **Session 400** Annual Membership Meeting and Breakfast                  |
| 10:15am-11:15am| **Session 407** Diagnostic and Interventional Treatments for Upper Extremity Injuries Using Musculoskeletal Ultrasound for OEM Physicians  
**Session 411** Medical Marijuana  
**Session 406** Exposure, Metabolomics and Biomarkers, and Health Outcomes: Part I  
**Session 408** Review and Update of 15 Years of the World Trade Center Health Program  
**Session 409** Providing a Warm Hand-off: Connecting Safety-net Primary Care Providers with Occupational Health Consultation |
| 11:15am-11:30am| Break                                                                  |
| 11:30am-12:30pm| **Session 407**, Continued  
**Session 411**, Continued  
**Session 406**, Continued  
**Session 408**, Continued  
**Session 409**, Continued |
Board of Directors – 2016-2017

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James A. Tacci, MD, JD, MPH, FACOEM
President-Elect
Charles M. Yarborough III, MD, MPH, FACOEM
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Designated Observers – 2016-2019
Catherine M. Champi, BC, CRNP, MSN, NP-C
Jack Lasoski, PA-C, NPAS

House of Delegates – 2016-2017
Speaker
Nelson S. Haas, MD, MPH, MA, FACOEM
Speaker-Elect
Douglas W. Martin, MD, FACOEM
Recorder
Darryl Lesoski, MD, MPH, FACOEM

2017 AOHC Program Planning Committee

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Francesca K. Litow, MD, MPH, MRO, FACOEM

Committee Members
Catherine Champi, BC, CRNP, MSN, NP-C
Rupali Das, MD, MPH, FACOEM
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Melanie D. Swift, MD, FACOEM
Craig D. Thorne, MD, MPH, FACOEM
Virginia M. Weaver, MD, MPH, FACOEM

Advisory Panel
Elizabeth W. Bisgard, MD, MPH
Mark J. Boquet, MD, MPH, MS
Robert M. Bourgeois, MD, MPH, FACOEM
Alisa M. Koval, MD, MHA, MPH
James A. Tacci, MD, MPH, JD, FACOEM
Roxana Z. Witter, MD, MS, MSPH
PRE-CONFERENCE COURSES

FRIDAY, APRIL 21, 2017
8:00am-5:00pm

Medical Center Occupational Health Basics........................................ CME/MOC: 7.5
Course Co-directors: Mark Russi, MD, MPH; Melanie Swift, MD

This course is designed for occupational physicians who provide medical direction to occupational health programs for healthcare personnel, with specific focus on physicians who are relatively new to caring for this population. This will cover principles of immunization and TB surveillance programs, infectious exposure evaluation and postexposure prophylaxis, management of infected healthcare workers, chemical and radiation hazards, and the basics of healthcare ergonomics.

FRIDAY-SATURDAY, APRIL 21-22, 2017
8:00am-5:00pm

Medical Review Officer-Comprehensive........ CME/MOC: 15.0
Course Director: Kent Peterson, MD, FACOEM

This course offers current and aspiring medical review offices (MROs) an excellent opportunity to increase and update their knowledge and familiarity with changes in substance abuse testing and federal regulations affecting the role of MROs. ACOEM has been the educational provider of choice for MROs since 1990. More than 14,000 physicians have completed ACOEM’s highly acclaimed training. The Medical Review Officer Certification Council (MROCC) will hold an examination at the Sheraton Downtown Denver hotel on Sunday, April 23 beginning at 8:00am. For additional information, contact MROCC at 847.631.0599 or mrocc@mrocc.org.

Foundations of Occupational Medicine........ CME/MOC: 15.0
Course Directors: Robin F. Griffiths, MBCHB, FACOEM, FAFOEM, FFOM, FFOMI, FACAsM, MPP
John W. Burress, MD, MPH, FACOEM

For physicians and health professionals interested in — but not particularly familiar with — occupational medicine (OM), ACOEM’s Foundations of Occupational Medicine courses provide an excellent and comprehensive introduction. You will obtain practical information that will be useful in managing the clinical, regulatory, and administrative functions of an OM practice — at a primary care level. Topics include: latest updates from NIOSH, Medical Emergency Response Planning, the latest on Zika for business travelers and much more!

You asked for an online Foundations of Occupational Medicine course — ACOEM answered! ACOEM is building an online course to launch in 2017. Check www.acoem.org/ACOEMCourses.aspx for more information.

Occupational Medicine Board Review .......... CME/MOC: 15.0
Course Director: John Meyer, MD, MPH, FACOEM

If you are striving to reach — or maintain — the definitive credential in your profession — occupational medicine certification by the American Board of Preventive Medicine (ABPM) — look no further for expert assistance and instruction. Now you can prepare confidently for the certifying or recertifying examination. By taking the ACOEM Occupational Medicine Board Review course, you can refresh your knowledge of the exam’s content, identify strengths and weaknesses in your preparation, and learn how to concentrate on areas for which you need more review. ABPM will hold the MOC examination at the Sheraton Denver Downtown Hotel on Sunday, April 23 at 9:00 am. For registration and exam details, please contact ABPM at www.theabpm.org.

SATURDAY, APRIL 22, 2017
8:00am-5:00pm

Business Leadership for Physicians: Necessary Knowledge Not Taught in Medical School ................. CME/MOC: 7.5
Course Director: Roger Chaufournier, MHSA

This one-day workshop will build capacity of participants based on core competencies for leadership identified by the ACOEM. These include Health and Productivity; Public Health, Surveillance, Disease Prevention; and OEM Related Management and Administration. The program begins with foundational principles of leadership in the context of OEM and introduces tools and methods using case presentations and small group simulation exercise to apply the leadership concepts and competencies to the medical director leader’s role in OEM.
POST-CONFERENCE COURSES

THURSDAY, APRIL 27, 2017
8:00am-5:00pm

Spirometry Testing in Occupational Health – Physician Update ............................................... CME/MOC: 7.5
Course Director: Mary Townsend, DrPH
Occupational medicine physicians frequently use spirometry in their practices, but their traditional medical training rarely prepares them to appreciate the impact of the technical pitfalls of spirometry testing, nor does it introduce them to the importance of using optimal interpretation algorithms. Both elements are important when practitioners use spirometry with other diagnostic tools to evaluate workers for occupational lung disease and/or to medically clear them to use respirators. This ACOEM course provides down-to-earth guidance, drawing information on spirometry from a comprehensive NIOSH-approved course, and selecting case examples for a physician audience to illustrate the use of spirometry and other diagnostic tools to evaluate workers for occupational lung disease and/or for medical clearance to use their respirator.

CAOHC Professional Supervisor of the Audiometric Monitoring Program Workshop ....................... CME/MOC: 7.5
The Professional Supervisor of the Audiometric Monitoring Program© (PS/A) Workshop is an intermediate-level, full-day course. It emphasizes the real-world application of audiology expertise as encountered in occupational settings. Lectures review the current literature and practice guidelines. Instructors present employee case studies for participant problem-solving, critical thinking and small-group discussion. Case presentations discuss professional supervisor responsibilities, guidelines for managing problem audiograms and determination of work-relatedness.

Course Director: Jennifer Christian, MD, MPH
All health care providers want to help their patients get better, but not all do. Some have unexpectedly poor recoveries. Left with chronic pain, persistent symptoms, and protracted work disability, these patients often are “stuck.” Their doctors feel the same. Too many cases begin as commonplace health problems but gradually morph into high cost tragedies – and a major concern for payers. Traditional medical approaches do not identify and resolve the root causes of these patients’ treatment-resistant distress and life disruption. A growing body of scientific evidence supports new interventions that address remediable issues impeding recovery in biological, psychological, sociological and economic (BPSE) realms. Attendees will: (1) learn how to expand their personal skill set and therapeutic repertoire in order to help redirect stuck patients towards a better future; (2) become more prepared to make evidence-informed changes to their practices through lecture, demonstrations, case studies, and abundant opportunities for interaction with faculty; and (3) leave with an implementation road map and practical tool it. Prerequisites: Familiarity with the BPSE model of sickness and disability as well as the work disability prevention approach.
SUNDAY, APRIL 23, 2017

7:00 am-8:00am
Session 099: New Member Orientation
No CME/MOC Credit Offered
TRACK(S): Other
Are you a potential or new member of ACOEM? Are you a current member who would like to become more involved? Then come to this informal event and network with component, section, and national leaders of the College. Discover ways to get involved and reach the maximum potential of your membership. Continental breakfast will be provided. This session may be of particular interest to residents and recent graduates.

9:00am-10:30am
Session 102: Monitoring Longitudinal Lung Function Measurements using SPIROLA .........................CME/MOC: 1.5
TRACK: OEM Clinical Practice
Wesley David Boose*, MD, MPH, US Naval Hospital Guam, Agana Height, GU
LCDR Cara N. Halldin, PhD, CDC/NIOSH, Morgantown, WV
Stella E. Hines*, MD, MSPH, University of Maryland School of Medicine, Baltimore, MD
Michael J. Hodgson*, MD, MPH, OSHA, Washington, DC
Eileen Storey*, MD, MPH, CDC/NIOSH, Morgantown, WV
ACOEM and the American Thoracic Society recommend longitudinal monitoring of pulmonary function tests to detect early signs of excessive lung function decline. Medical surveillance programs that include periodic spirometry can identify workers with excessive lung function decline, providing an opportunity to intervene. Spirometry Longitudinal Data Analysis (SPIROLA) Software is a free tool that can assist with longitudinal spirometry monitoring and detect those at risk for excessive decline. This session will introduce SPIROLA’s capabilities to help monitor longitudinal lung function in individuals and among groups, as well as monitoring test quality. Examples of how to use SPIROLA in research and clinical practices will be presented, as well as how spirometry falls under OSHA’s record keeping and respiratory protection rules. This session may be of particular interest to residents and recent graduates.

9:00am-12:15pm
Session 101: Introduction to OEM (for newcomers to occ med only) ....................... CME/MOC: 3.0
TRACK: Other
Robert M. Bourgeois*, MD, MPH, FACOEM, Bourgeois Medical Clinic, Morgan City, LA
Natalie P. Hartenbaum*, MD, MPH, FACOEM, OccuMedix, Dresher, PA
Douglas Wayne Martin*, MD, FAOEM, FAAFP, FIAIME, Unity Point Clinic – St. Luke’s Occupational Medicine, Sioux City, IA
Mark A. Roberts*, MD, PhD, FAOEM, Exponent, Inc., Chicago, IL
Daniel G. Samo*, MD, FAOEM, Northwest Medical Group, Chicago, IL
Are you aware of family, urgent care, or internal medicine physicians, nurse practitioners, or physician assistants who are not trained in OEM but are interested in adding some OEM competencies to their “tool kits”? If so, let them know about this great opportunity to learn more about OEM! Are you seeing patients with occupational illnesses or injuries such as musculoskeletal injuries with impairment for joints and the spine or opioid-related issues in the workplace? Are you asked to develop return-to-work plans for your patients? This session will provide a brief introduction on the ways that primary care physicians and other practitioners can benefit from the many resources of OEM. This session is intended for those who are new to the field of occupational medicine. This session may be of particular interest to residents and recent graduates.

Session Designation: Speakers who are members of ACOEM are indicated with an asterisk (*) throughout this program. The College would like to take this opportunity to recognize their contribution to ACOEM.
CONCURRENT SESSIONS

SUNDAY, APRIL 23, 2017
9:00am-12:15pm

Session 103: Occupational and Personal Risk Factors in Illness and Injury: The NIOSH Compendium Project ..................... CME/MOC: 3.0
TRACK: OEM Education and Scientific Research
L. Casey Chosewood, MD, MPH, NIOSH, Atlanta, GA
Judith Green McKenzie*, MD, MPH, FACP, FACP, FACP, FACOEM, University of Pennsylvania, Philadelphia, PA
Michele Kowalski-McGraw*, MD, MPH, Lehigh Valley Health Network, Mountain Top, PA
Dalia E. Nessim*, MD, MPH, University of Texas Health Northeast, Tyler, TX
Sudha P. Pandalai, MD, PhD, NIOSH, Cincinnati, OH
Paul Schulte, PhD, NIOSH, Cincinnati, OH
Eric Wood*, MD, MPH, FACOEM, University of Utah Rocky Mountain Center for Occupational and Environmental Health, Salt Lake City, UT

The compendium of occupational and personal risk factors (ORFs/PRFs) in disease and injury is designed to inform general medical and occupational medicine practitioners, researchers, as well as employers, workers, and other stakeholders that there are many instances where ORFs and PRFs can combine to affect disease or injury. Compendium projects undertaken by NIOSH researchers in collaboration with clinicians, researchers and medical residents at several occupational medicine residency programs in the US and methodological considerations for examining occupational and personal risk factors in the workplace will be discussed. Examples of ORF/PRF outcome interrelationships presented will focus on obesity, physical inactivity, prescription opiate and benzodiazepine use, ethnicity, and exposure biomonitoring and health effect biomarkers for occupational and personal risk factors. Future considerations and ORFs, PRFs, and issues in Total Worker Health® will be discussed. This session may be of particular interest to residents and recent graduates.

Session 104: Research Laboratory Biohazard Exposure Management ...................................................... CME/MOC: 3.0
TRACK: OEM Clinical Practice
Amy Behrman*, MD, FACOEM, University of Pennsylvania, Philadelphia, PA
Roger M. Belcourt*, MD, MPH, FACOEM, University of California, Davis, CA
T. Warner Hudson*, MD, FACOEM, FAAFP, UCLA Health System and Campus, Los Angeles, CA
Robert E. Kosnik, MD, DIH, University of California, San Francisco, CA
Tom Winters*, MD, FACOEM, Occupational Environmental Health Network, Marlborough, MA

Research laboratory workers risk exposure to a range of viral, bacterial, and fungal pathogens. These agents are often zoonotic and increasingly involve viral vector constructs with oncogenic as well as infectious disease potential. This case-based session will address exposure prevention, counseling, surveillance, and post-exposure management for a range of laboratory pathogens including Lentivirus vectors, Herpes B virus, Q fever, Brucella, pox viruses, Burkholderia, toxoplasmosis, and Meningococcus. Occupational medicine physician roles in developing and executing treatment protocols, collaborating with researchers and veterinary staff, and participating on institutional biosafety committees will be reviewed. This session was organized by the Medical Center Occupational Health Special Interest Section.

10:45am-12:15pm

Session 105: Occupational Spirometry Highlights: Pitfalls and Interpretation ............................................. CME/MOC: 1.5
TRACK: OEM Education and Scientific Research
Mary C. Townsend*, DrPH, MC Townsend Associates, LLC, Pittsburgh, PA

Occupational spirometry is often performed to comply with federal regulations and industry requirements. However, the technical quality of such testing is often mediocre, producing inaccurate results and leading to incorrect inferences about worker health. To increase practitioners’ awareness of the impact of spirometry’s many aspects, this session draws on requirements and best practice guidelines for occupational testing. Recent regulatory requirements for spirometry in miners and in silica-exposed workers will be reviewed. Major spirometer issues, requirements for valid tests, volume-time and flow-volume curves and what they tell the technician and the practitioner, and interpretation of test results will also be covered. Testing errors will be demonstrated. Session participants are encouraged to print out OSHA 3637-03 2013: Spirometry Testing in Occupational Health Programs: Best Practices for Healthcare Professionals from www.osha.gov/Publications/OSHA3637.pdf.
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SUNDAY, APRIL 23, 2017
1:30pm-2:30pm

Session 106: Occupational Dermatoses: What the Practicing Occ Doc Needs to Know.................................CME/MOC: 1.0
TRACK: OEM Clinical Practice

Heather P. Lampel*, MD, MPH, FACOEM, FAAD, Cary
Dermatology, Cary, NC

Workers in many occupations are at risk for development of work-related or work-exacerbated skin conditions. Identification and appropriate management of occupational dermatoses, including but not limited to allergic and contact dermatitis, are important to reduce lost work time and to correctly identify workers who may need restrictions, job reassignment, and/or vocational rehabilitation. A case-based approach will be used to discuss the epidemiology, risk factors, clinical presentation, and initial management of common occupational skin conditions, including irritant, allergic, and contact dermatitis. The session will also include a discussion about indications for referral to dermatology specialists for specific skin conditions. This session may be of particular interest to residents and recent graduates.

Session 107: Cutting-Edge Sustainability Models for Health Care Employers: Delivering Well-Being to Patients, Employees, and the Community .....................CME/MOC: 1.0
TRACK: Environmental Health and Risk Management

Ismail Nabeel*, MD, MPH, FACOEM, Mount Sinai Health Systems, New York, NY
Emily Senay*, MD, MPH, Icahn School of Medicine at Mount Sinai, New York, NY

Many hospitals and academic medical centers have addressed the issue of environmental sustainability through the “greening” paradigm. Under this paradigm, hospitals seek to become green or “less bad” by recycling more, reducing energy, and supporting employee and patient wellness programs that reduce environmental footprints. These efforts either stand alone or run alongside operations or the executive suite. In contrast, over the past decades many businesses and corporations have not only been able to reduce their carbon footprint, but are now aspiring to do “more good” (increase human well-being). This concept is known as NET positive. This session will discuss cutting-edge sustainability concepts and make the case for a new health care business paradigm where hospitals embrace NET positivity and become leaders in delivering well-being to patients, employees, and community members.

Session 108: Protecting Health Care Workers in Hospitals: The PRO PPE Sentinel Surveillance System for Contagious Pathogens .......................................................CME/MOC: 1.0
TRACK: Management and Administration in OEM

Muktar Aliyu*, MD, DrPH, FACOEM, Vanderbilt University Medical Center, Nashville, TN
Melanie Swift*, MD, FACOEM, Vanderbilt University Medical Center, Nashville, TN
Mary Yarbrough*, MD, MPH, FACOEM, Vanderbilt University Medical Center, Nashville, TN

In the event of a pandemic, a new highly contagious pathogen, or bioterrorism, health care worker (HCW) safety relies largely on the effective use of personal protective equipment (PPE). During the H1N1 influenza and Ebola outbreaks, hospitals experienced supply and training challenges related to implementing new CDC recommendations for PPE. The federal agencies who develop new recommendations are not privy to PPE inventory management systems in hospitals, and the strategic national stockpile cannot predict local demands without data on PPE makes and models for which HCW have been trained. Within a facility, stakeholders such as supply chain, occupational health, and emergency preparedness often operate independently. Nationally, there is a lack of clarity regarding US preparedness to protect HCWs while caring for large numbers of highly infectious patients in hospitals. This session will describe the development of a national surveillance system to monitor PPE supply and effective use in hospitals in collaboration with CDC-NIOSH. This session was organized by the Medical Center Occupational Health Special Interest Section.

Session 109: Cluster Busters: The Approach to Cancer Clusters and the Limitations of Environmental Epidemiology ..................................................CME/MOC: 1.0
TRACK: Regulatory, Legal, Military, and Governmental OEM


Cancer is common and rates vary by type, and the age/sex of the population of interest and their habits, environments, and genetics. Because of or in spite of this, it is not common for a group to perceive that a cancer (or cancers) is occurring too frequently among their ranks. Cancer-cluster evaluations are frequently requested of state or local public health departments and may be requested based on the perceptions of a concerned community or workplace. This session starts with an overview of cancers of interest to the military and potentially associated with military service. Cancer clusters will be discussed with an overview of several clusters evaluated by the US Army Public Health Center. The steps in these assessments will be discussed and some lessons learned or points to consider will be presented. The limitations and challenges of epidemiological approaches to environ-
CONCURRENT SESSIONS

mental exposures and cancers will be discussed. This session was organized by the Federal and Military Occupational and Environmental Medicine Special Interest Section.

2:45pm-3:45pm

Session 110: Becoming and Maintaining Board Certification in OEM ............................................................. CME/MOC: 1.0

TRACK: Other

Clare Bonnema, MLIS, American Board of Preventive Medicine, Chicago, IL
Natalie P. Hartenbaum*, MD, MPH, FACOEM, OccuMedix, Dresher, PA

Members of the American Board of Preventive Medicine (ABPM) will discuss specifics regarding the rules for acceptance as a candidate to sit for the initial certification examination, as well as for the four parts required for recertification under maintenance of certification: 1) professionalism; 2) lifelong learning; 3) cognitive examination; and 4) practice performance. Extensive Q&A with attendees has been a hallmark of this session. Additional information is available on the ABPM web site at www.theabpm.org. This session may be of particular interest to residents and recent graduates.

Session 111: Application of Advanced Neuroscience Theories to the Treatment of Workers with Painful Musculoskeletal Conditions ............................................. CME/MOC: 1.0

TRACK: OEM Clinical Practice

Russell Gelfman*, MD, MS, Mayo Clinic College of Medicine, Rochester, MN

The number of Americans affected by chronic pain exceeds the number affected by diabetes, heart disease, and cancer combined. It is one of the most common reasons for seeking health care, is a leading cause of short-term disability, and is the most common cause of long-term disability. It represents a significant portion of the 20% of injured workers who contribute to 80% of the costs involved in workers’ compensation. Despite these statistics, the average physician is often poorly informed about current neuroscience theories of pain and the benefits and risks of various treatment options for pain. As a result, acute and chronic pain is often inadequately treated. This presentation will review current theories of pain on the continuum from acute to chronic and review treatment options in light of this knowledge to improve the care of injured workers who experience disabling musculoskeletal pain.

Session 112: Using Cutting-edge Informatics Tools to Enhance Occupational Health Services in Academic Medical Centers................................................................. CME/MOC: 1.0

TRACK: Management and Administration in OEM

Amir Mohammad*, MD, FACOEM, VA Connecticut VHA/Yale School of Medicine, Orange, CT
Ismail Nabeel*, MD, MPH, FACOEM, Mount Sinai Health Systems, New York, NY

This session will review the different electronic medical record (EMR) and surveillance database infrastructure currently used in two separate academic medical centers (Veterans Health Administration and Mount Sinai School of Medicine). The session will provide a better understanding of how to incorporate fundamental of informatics principles for an effective usage of EMR (connectivity, usability, care delivery, big data) within the occupational medicine setting. Newer tools demonstrating pattern recognition based on informatics and analytical tools to help with clinical or population study focused intervention within the field of occupational medicine. Review and analysis of data warehouse to support occupational health services. Introduction of NIOSH-funded research pilot project, Using Informatics principles to enhance occupational medicine understanding among primary care physicians. Use of smart FHIR, SNOMED, and wearable technologies to enhance occupational health services.
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SUNDAY, APRIL 23, 2017

2:45pm-3:45pm

Session 113: Pregnant Worker: Current Challenges and Current Concepts

CME/MOC: 1.0

TRACK: OEM Clinical Practice

Joseph Leonce Charlot*, MD, MPH, MRO, CIME, RWJ Barnabas Health Corporate Care, Clara Maass Medical Center, Belleville, NJ

This presentation will focus on the pregnant worker, and discuss current challenges and current concepts.

Session 114: Journal Club for the Practicing OEM Physician

CME/MOC: 1.0

TRACK: OEM Education and Scientific Research

Ronda B. McCarthy*, MD, MPH, FACOEM, City of Waco Employee Health Services, Concentra, Waco, TX
Judith Green McKenzie*, MD, MPH, FACP, FACPM, FACOEM, University of Pennsylvania, Philadelphia, PA

This session will use a journal club format to allow physicians an opportunity to refresh their ability to critically appraise scientific evidence and discuss with their peers how it translates into professional practice. The session will provide a forum for practicing physicians to participate in a guided critical appraisal of the scientific literature. After a brief overview, attendees will be guided through the structured steps by experienced faculty using a round-table discussion format. A current high impact article will be reviewed. The salient elements to be examined are study hypothesis, study design, selection of the study population, data collection methods, statistical analysis, the role of chance, bias and confounding on internal validity, external validity, and context. Both article and template will be provided prior to the conference. This session was organized by the History and Archives Special Interest Section.

Exhibit Hall Reception

SUNDAY, APRIL 23, 2017

4:00pm - 5:45pm

Join the ACOEM Board of Directors and the Program Planning Committee for the Opening Reception in the exhibit hall. Network with friends over food and drink, see what exciting products and services the exhibitors are showing, and view the impressive poster presentations.

SUNDAY, APRIL 23, 2017

6:00pm - 7:30pm

AOHC Opening Session

Session 100: AOHC Opening Session: Induction of New Fellows, C. O. Sappington Lecture, and Awards Presentation

CME/MOC: 1.0

TRACK(S): Other

The opening session of the 101st annual meeting of the American College of Occupational and Environmental Medicine will feature the induction of new Fellows and the C.O. Sappington Memorial Lecture. Named for Clarence Olds Sappington, MD, DrPH (1889-1949), a noted consultant in occupational diseases and industrial hygiene, this lecture is presented annually at AOHC to serve as a forum to address major issues in occupational and environmental medicine. ACOEM past president, Ronald R. Loeppke, MD, MPH, FACOEM, with US Preventive Medicine Inc., will deliver this year’s Sappington lecturer.
CONCURRENT SESSIONS

Speaker Designation: Speakers who are members of ACOEM are indicated with an asterisk (*) throughout this program. The College would like to take this opportunity to recognize their contribution to ACOEM.

MONDAY, APRIL 24, 2017
7:00am-8:00am

Session 200: What Constitutes Excellence: The Best Corporate Health and Safety Programs in America ......................................................... CME/MOC: 1.0
TRACK: Other
Fikry W. Isaac*, MD, MPH, FACOEM, Wellworld Consulting, Sarasota, FL

The Corporate Health Achievement Award (CHAA) was first presented in 1997 to recognize organizations for their outstanding, comprehensive array of programs dedicated to protecting and improving the safety, health, and productivity of their workforces. During this session, 2017 CHAA recipients will discuss those aspects of their health programs that may serve as model practices for occupational and environmental medicine and highlight qualities of excellence identified by reviewers. These companies continue to demonstrate that building a culture of health and safety by focusing on the well-being and safety aspects of the workplace yields greater value when compared to companies that do not adhere to CHAA standards.

Session 201: Opportunities for Integrating Health and Protection and Health Promotion ..................... CME/MOC: 1.0
TRACK: Management and Administration in OEM
Janis Davis-Street*, MS, EdD, CHES, Chevron, Houston, TX
Stephen A. Frangos*, MD, MPH, FACOEM, Chevron Corporation, Houston, TX

Total Worker Health® (TWH) is a NIOSH/CDC strategy that proposes that integrating occupational safety and health with workplace health promotion results in a “synergism of prevention” to improve the health of the workforce. This session will identify two key areas where health promotion programming has begun to be integrated with health protection practices in multiple settings within a multinational oil company. The evidence base supporting health as an enabler of safety and productivity will be presented with specific focus on sleep and obesity. Leveraging standard process improvement techniques, the session will describe the evolution of whole-person health strategies that focus on sleep health and weight management as a means of improving health, safety and human performance. Success factors and challenges that accompany the implementation of TWH in a decentralized company will be discussed.

Session 202: Becoming an ACOEM Fellow ....... CME/MOC: 1.0
TRACK: Other
Natalie P. Hartenbaum*, MD, MPH, FACOEM, OccuMedix, Dresher, PA

Fellow is the highest classification of membership in ACOEM. Fellowship distinguishes and recognizes members of the College for their training, accomplishments, and experience in occupational medicine at the national, component, and local levels, as well as the member’s academic and scientific contributions. The Committee of Fellowship Examiners feels passionately that the College needs more Fellows and that those who are making significant contributions to the College and the field of occupational and environmental medicine deserve special recognition. Come to this session to learn about the Fellowship application process.

Session 203: The Independent Medical Examination ................................................. CME/MOC: 1.0
TRACK: Regulatory, Legal, Military, and Governmental OEM
Douglas Wayne Martin*, MD, FACOEM, FAAFP, FIAIME, Unity Point Clinic – St. Luke’s Occupational Medicine, Sioux City, IA

This session will cover the basics and fundamentals of providing an independent medical examination (IME). The session will cover how to start an IME practice and some of the business pitfalls to avoid. It will discuss the methodology of record review and also skills for performance of history taking and for the physical exam. Lastly, the session will cover the importance and significance of creating a well-written and defendable report. This session was organized by the Private Practice in Occupational Medicine Special Interest Section. This session may be of particular interest to residents and recent graduates.
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MONDAY, APRIL 24, 2017

7:00am-8:00am

Session 204: ACOEM Legislative and Government Affairs Update: Recent Wins and Ongoing Challenges for the Public Affairs Council .................................................... CME/MOC: 1.0
TRACK: Regulatory, Legal, Military, and Governmental OEM

Pamela Hymel*, MD, MPH, FACOEM, Walt Disney Parks and Resorts, Anaheim, CA
Robert K. McLellan*, MD, MPH, FACOEM, Dartmouth-Hitchcock Medical Center, Lebanon, NH
Patrick O’Connor*, Kent & O’Connor, Inc., Washington, DC
Paul J. Papanek*, MD, MPH, FACOEM, Cal/OSHA, Long Beach, CA

This session will cover ACOEM’s recent activities in government affairs including what ACOEM is doing about health care reform, opioid policy, OEM residency funding, TSCA, lead poisoning, DOT and sleep apnea, OSHA regulations, GINA; and other topics of current interest. The session will also highlight a number of difficult policy issues that ACOEM faces as a nationally recognized policy leader in OEM and preventive medicine, including controversies about gun safety legislation, global climate change, and credentialing of health care providers. Lastly, the session will help the attendee understand the political climate in Washington as it relates to the house of medicine.

Session 205: Restoring Function and Return-to-Work after Spinal Cord Injury: PEAK Strategies ................. CME/MOC: 1.0
TRACK: OEM Education and Scientific Research

Candace Tefertiller, PT, DPT, NCS, Craig Hospital, Englewood, CO

Approximately 12,000 individuals sustain a spinal cord injury (SCI) each year. In 2016, the mean age of individuals who experienced a SCI was 40.2 years which means that the majority were also engaged in the workforce. Historically, it has been challenging for individuals to return-to-work after an SCI due to ongoing health-related issues, as well as mobility limitations. However, there have been recent technological advancements that have facilitated greater recovery of function and mobility after a SCI allowing many individuals to return to their previous employment. These advancements have also led to the development of activity-based therapy community centers which provide ongoing access and support. This presentation will review recent technological advancements that have resulted in improved mobility and wellness outcomes and will be supported by case studies depicting healthy and productive individuals who have returned to work after a SCI.

8:30am-10:00am

Session 206: OEM and Human Factors: Collaborative Efforts and Update......................................................... CME/MOC: 1.5
TRACK: OEM Clinical Practice

Andrew S. Imada, PhD, Human Factors and Ergonomics Society, Santa Monica, CA
William S. Marras, PhD, CPE, Ohio State University, Columbus, OH
Amy May, MC, CPE, The Boeing Company, Seattle, WA
David Rempel*, MD, FACOEM, University of California, San Francisco, CA
Mark A. Roberts*, MD, PhD, FACOEM, Exponent, Inc., Chicago, IL

Today’s workplaces are challenged to accommodate for a multitude of factors from generational differences, anthropomorphic changes, varying operational processes, as well as cultural diversity. This session will explore the role of human factors and ergonomics professionals in the workplace on improving safety and health. Brief presentations will be made on the application of a systems approach to workplace safety and health; design principles to accommodate workers, especially those who are overweight and aging; and accommodating the injured worker in return to work. The moderator will encourage comments and questions from the audience. The goal will be to identify workplace situations where these factors work well with OEM to achieve a common goal of maintaining a healthy and productive workplace and workforce.

Session 207: What You Can Do with the COHE Model: Implications for Action ......................................CME/MOC: 1.5
TRACK: Management and Administration in OEM

Paul Allen*, MD, Confluence Health, Wenatchee, WA
Dianna Chamblin*, MD, The Everett Clinic, Everett, WA
Jennifer Christian*, MD, MPH, FACOEM, Wembity Corporation, Wayland, MA
Nicole Cushman, COHE Alliance of Western Washington, Tacoma, WA
Benjamin D. Doornink, St. Luke’s Rehabilitation Institute, Spokane, WA
Karen L. Nilson*, MD, Valley Medical Center, Renton, WA
Thomas Wickizer, MD, Ohio State University College of Public Health, Columbus, OH

This session explores the implications of Washington State’s highly successful community-based Centers for Occupational Health and Education (COHE) program for occupational medicine physicians outside Washington State, whether they are in clinical practice or in entrepreneurial, managerial or executive roles. This session begins with a brief overview of the COHE
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Community-based “best practices” model for management of work injuries and its well-documented good results: increased worker and employer satisfaction, improved functional outcomes, reduced lost work days and job loss, and a $4,000 reduction in mean cost per claim. The majority of the session will be spent exploring main opportunities to exploit COHE’s success in other settings. Take advantage of the quantitative evidence that the COHE program has produced to market occupational medicine practices or related businesses and implement an approach similar to COHE outside Washington. The COHE model is a public health/healthcare delivery innovation to upgrade the quality of care across whole communities or regions. Employers or insurers in other jurisdictions may view an adapted COHE model as a good solution for areas in which there is a shortage of trained occupational medicine physicians. This session was organized by the Work Fitness and Disability Special Interest Section.

Session 208: MRO Controversies ...................... CME/MOC: 1.5
TRACK: Regulatory, Legal, Military, and Governmental OEM

Karl Auerbach, MD, MS, MBA, FACOEM, Pulse Occupational Medicine, Greece, NY
Natalie P. Hartenbaum*, MD, MPH, FACOEM, OccuMedix, Dresher, PA
Paula Lantsberger*, MD, MPH, FACOEM, Occupational Medicine Associates, Spokane, WA
Douglas Wayne Martin*, MD, FACOEM, FAAFP, FIAIME, Unity Point Clinic – St. Luke’s Occupational Medicine, Sioux City, IA

The session is intended to cover topics that are not traditionally the focus of standard medical review officer (MRO) educational or training programs. The session will include updates on Department of Transportation focal points from the prior year and also address difficult MRO issues, including medicinal or state specific legal recreational marijuana use, and fitness-for-duty issues. The session will end with an MRO Jeopardy game show comprised of audience contestants that is used as a fun way to refresh MRO knowledge and its application. This session was organized by the Medical Review Officers Special Interest Section.

Session 209: What We Can Learn About Back Pain and Work Using Population-based Data from the NHIS .. CME/MOC: 1.5
TRACK: OEM Education and Scientific Research

Matthew Groenewold, PhD, CDC/NIOSH, Cincinnati, OH
Ming-Lun Lu, PhD, NIOSH/CDC, Cincinnati, OH
Sara Luckhaupt*, MD, MPH, NIOSH, Cincinnati, OH

Low back pain (LBP) is one of the leading contributors to OSHA-recordable injuries/illnesses and workers’ compensation claims. But cases of LBP included in these statistics likely only represent a small proportion of all LBP cases related to work because there are many barriers to both the recognition of work-relatedness and to reporting. Population-based data about LBP among all US adults, including workers, is available from the National Health Interview Survey (NHIS). The annual core NHIS includes one question about LBP, and the 1988 and 2015 occupational health supplements (OHS) included additional questions about LBP and its risk factors. In this session, NIOSH investigators will describe the NHIS, new estimates of the burden of LBP, and the prevalence of physical and psychosocial risk factors for LBP among US workers based on the 2015 NHIS-OHS, and NIOSH’s efforts to develop a workforce musculoskeletal pain surveillance tool.
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MONDAY, APRIL 24, 2017

8:30am-12:00pm

Session 210: Resident Research Abstract Presentations
CME/MOC: 3.0
TRACK: Other

John D. Meyer*, MD, MPH, FACOEM, Mount Sinai School of Medicine, New York, NY

This session will provide residents in occupational and environmental medicine with a forum to present current and cutting-edge research. This session may be of particular interest to residents and recent graduates. This session may be of particular interest to residents and recent graduates.

Session 211: OSHA/NIOSH Investigations: Exploring Newly Emerging and Persistent Occupational Scourges. CME/MOC: 3.0
TRACK: OEM Education and Scientific Research

Bruce P. Bernard, MD, MPH, CDC/NIOSH, Cincinnati, OH
Dawn L. Cannon, MD, MS, OSHA, Washington, DC
Judith Eisenberg, MD, MS, NIOSH, Cincinnati, OH
Kathleen Fagan*, MD, MPH, FACOEM, OSHA, Washington, DC
Michael J. Hodgson*, MD, MPH, OSHA, Washington, DC
Aaron Tustin, MD, MPH, OSHA, Washington, DC
Douglas Wiegand, PhD, CDC/NIOSH, Cincinnati, OH

NIOSH and OSHA investigators will present a series of presentations on recent workplace investigations and health-hazard evaluations. Faculty will describe the workplace settings, the specific approaches involving workplace exposures and medical aspects of the cases, the investigation results, and the recommendations to employees, employers, and other stakeholders. Implications for occupational medicine practice, regulations, research, worker and employer education, and public health practice will be explored. Issues to be addressed will include a combination of newly emerging occupational exposures and illnesses, as well as those exposures which remain the scourge of workers decades after the health risks have been recognized. Time for questions and discussion will be included. This session may be of particular interest to residents and recent graduates.

10:30am-12:00pm

Session 212: Interdisciplinary Approaches to Addressing the International Epidemic of Chronic Kidney Disease of Unknown Origin (CKDu) in Agricultural Workers. CME/MOC: 1.5
TRACK: Management and Administration in OEM

Claudia Asensio, DrPH, RN, Pantaleon Group, Guatemala City, Guatemala
Jaime Butler-Dawson, PhD, MPH, University of Colorado School of Public Health, Aurora, CO
Alex Alberto Cruz Aguilar, MD, Pantaleon Sugar Holdings, Siquinála, Escuintla, Guatemala
Lee S. Newman*, MD, FACOEM, Center for Worker Health and Environment, Colorado School of Public Health, Denver, CO
Liliana Tenney, MPH, Center for Health, Work & Environment, Colorado School of Public Health, Aurora, CO

Recent research has confirmed that workers employed by sugar cane plantations and other agribusinesses are in an international epidemic of chronic kidney disease of unknown origin (CKDu), also referred to as Mesoamerican Nephropathy. CKDu largely affects adult men who do not have traditional causes of chronic kidney failure and who work under conditions of high heat and physical exertion in Latin America and parts of Asia. Many theories have been proffered to explain this epidemic. Our team of physicians, exposure scientists, physiologists, epidemiologists, and others is collaborating with companies in Guatemala that are committed to corporate social responsibility to address CKDu, using a Total Worker Health® approach. This session will report what is currently known about the epidemiology, risk factors, mechanisms, interventions, and implications. The session will also examine the pivotal role that occupational medicine can play in addressing this global threat to worker health and productivity. This session was organized by the Rocky Mountain Academy of Occupational and Environmental Medicine.

Session 213: Responsibilities of the Occupational and Environmental Medicine Physician in the Treatment and Prevention of Climate Change Related Health Problems........ CME/MOC: 1.5
TRACK: Environmental Health and Risk Management

Margaret Cook-Shimanek, MD, MPH, Resources for Environmental and Occupational Health, Missoula, MT
Tee Guidotti*, MD, MPH, FACOEM, O+EH&M, Washington, DC
Ronda B. McCarthy*, MD, MPH, FACOEM, City of Waco Employee Health Services, Concentra, Waco, TX
Ismail Nabeel*, MD, MPH, FACOEM, Mount Sinai Health Systems, New York, NY
Mellisa Pensa*, MD, MPH, Yale Occupational and Environmental Medicine, New Haven, CT
William B. Perkison*, MD, MPH, FACOEM, University of Texas School of Public Health, Houston, TX
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Poune Saberi*, MD, MPH, Hospital of the University of Pennsylvania, Philadelphia, PA
Paul Schulte, PhD, NIOSH, Cincinnati, OH

An overview of the occupational health effects of climate change on workers will be presented. Small groups will come up with a list of potential threats specific to their workplace or home setting that could be affected by climate change and present ideas for mitigating that threat. Following the audience discussion, a panel will present their proposed ACOEM position paper stating the responsibilities of the occupational and environmental medicine physician in the treatment and prevention of climate change related health problems. This session was organized by the Environmental Health Special Interest Section, in conjunction with the Underserved Occupational Populations Special Interest Section.

Session 214: Sit Versus Stand: Optimal Combinations for Managing Low Back Pain ............................................. CME/MOC: 1.5
TRACK: OEM Clinical Practice

Jack P. Callaghan, PhD, CCPE, FCSB, University of Waterloo, Waterloo, ON, Canada
Fred Gerr*, MD, FACOEM, University of Iowa, College of Public Health, Iowa City, IA
David Rempel*, MD, FACOEM, University of California, San Francisco, CA

Among office workers, low back pain can be associated with prolonged sitting or standing. This session will review recent epidemiologic findings linking low back pain among sedentary workers to the duration of sitting or standing in the workplace. In addition, recent laboratory studies of sedentary workers with low back pain have investigated a range of patterns of sitting and standing to identify combinations that are associated with the greatest relief of pain. Both, epidemiological and laboratory/mechanistic studies examining effects of sitting and standing on back pain will be reviewed.

10:30am-3:00pm

Session 215: What Physicians Need to Know About Health Care Ergonomics: Safe Patient Handling and Beyond ............................................................. CME/MOC: 3.0
TRACK: OEM Education and Scientific Research

Margaret S. Atwell*, MD, FACP, FACOEM, Reading Health, West Reading, PA
Laura Breeher*, MD, MS, MPH, Mayo Clinic, Rochester, MN
Debra Milek*, MD, PhD, MPH, University of Washington, Seattle, WA
Wilma Traughber, MSN, RN-BC, Vanderbilt University Medical Center, Nashville, TN
Andrew I. S. Vaughn*, MD, MPH, Mayo Clinic, Rochester, MN
Mamie Williams, MPH, MSN, FNP-BC, Vanderbilt University Medical Center, Nashville, TN

Musculoskeletal injuries are the leading cause of disability in health care and related fields. While 11 states have established requirements for safe patient handling (SPH) and there have been efforts to create a national requirement for SPH programs, for most health care workers patient handling remains a major hazard. Representatives from major medical centers will share lessons learned from experience with implementing and supporting safe patient handling programs. Data demonstrating the value and efficacy of SPH will be discussed. Innovative ideas for proactively addressing ergonomic challenges posed by other healthcare activities will be highlighted, including tips and tools for increasing comfort and reducing injuries in diverse areas throughout a facility from housekeeping to imaging. The Rapid Entire Body Assessment (REBA) tool will also be introduced which can be used for objective measurement in ergonomic evaluation of a task. During the session, participants will gain practical experience with a hands-on opportunity with ergonomic equipment. This session was organized by the Medical Center Occupational Health Special Interest Section.
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**MONDAY, APRIL 24, 2017**

1:30pm-3:00pm

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**Session 216: TED2 - The Best of OEM: Top OEM Contributions to the World**

**TRACK: Other**

Constantine Gean*, MD, FACOEM, Liberty Mutual Insurance Company, Glendale, CA
Kent W. Peterson*, MD, FACOEM, Occupational Health Strategies, Charlottesville, VA

TED2, presented at the 2015 AOHC in Baltimore, focused on practical skills and tools for improving presentation effectiveness in order to take presenters from “good” to “great” to “outstanding.” TED2 speakers will apply these skills in short, dynamic presentations that succinctly communicate OEM’s top contributions to the world, to employers, workers and communities. The session will address the question, “What is OEM’s competitive advantage?” (Restated, what simple key lessons could employers and workers learn from a hundred years of OEM experience?) Top contributions are selected based on dialog, literature reviews and interaction with the speakers. The session will showcase well-documented, evidence-based workplace policies, programs, practices skills and tools that give OEM professionals competitive advantage. TED1 speakers will coach bright, articulate future OEM leaders to summarize the best evidence of OEM’s top contributions to society.

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**Session 217: Drug Formularies in Workers’ Compensation**

**TRACK: OEM Clinical Practice**

Robert Goldberg*, MD, MPH, FACOEM, HealtheSystems, Lafayette, CA
Paul J. Papanek*, MD, MPH, FACOEM, Cal/OSHA, Long Beach, CA
Alex Swedlow, California Workers’ Compensation Institute, Oakland, CA

In the last few years, several states have recently moved to implement drug formularies in their workers’ compensation systems. Additionally, at least two commercial formularies are already in widespread use for patients treated under workers’ compensation. This session will describe the general structure and operation of drug formularies, provide information and their use in practice in several states, and will provide a practical introduction to currently available workers’ compensation drug formularies.

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**Session 218: OEM and Workplace Wellness: Paving the Way for Value-Driven Population Health**

**TRACK: Management and Administration in OEM**

Harris Allen, PhD, Harris Allen Group, Atlanta, GA
Paul Brandt-Rauf*, DrPH, MD, ScD, FACOEM, University of Chicago School of Public Health, Chicago, IL
William B. Bunn*, MD, JD, MPH, FACOEM, Medical University of South Carolina, Hilton Head Island, SC
Jeremy Nobel, MD, MPH, MS, Northeast Business Group on Health, New York, NY

As concerns over mediocre health outcomes and off-the-charts health care spending intensify, strategies for improving population health and health care value have been gaining traction along largely separate tracks. Their fusion and the synergies that result have yet to be explicitly embraced. Workplace wellness has evolved as a major exception as leading employers have become better performers in their stakeholder role – and propelled and modeled the use of an emerging science, value-driven population health (VDPH) – by blending elements from both and achieving major gains in health, well-being, and performance while reining in health care costs. OEM has a leading role to play in advancing the use of VDPH by these purchasers and broadening its uptake in the marketplace by other purchasers and stakeholders. This session will focus on how workplace wellness has helped forge the emerging science of VDPH and what OEM policymakers and practitioners can do to accelerate its uptake.

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**Session 219: The Beryllium Standard: From Science to Policy**

**TRACK: Environmental Health and Risk Management**

Alisa M. Koval*, MD, MPH, MHSA, Denver Health/COSH, Denver, CO
Lisa Maier*, MD, MSPH, FCCP, National Jewish Health, Denver, CO
Lisa Maier*, MD, MSPH, FCCP, National Jewish Health, Denver, CO
Margaret M. Mroz, MSPH, National Jewish Health, Denver, CO
Lee S. Newman*, MD, FACOEM, Center for Worker Health and Environment, Colorado School of Public Health, Denver, CO
Maureen Ruskin, OSHA, US Department of Labor, Washington, DC

This session will bring together a group of experts in the science and policy of chronic beryllium disease (CBD), a lung condition that workers can develop when particles of beryllium or beryllium compounds are inhaled. In addition, beryllium is a known carcinogen linked to lung cancer. Currently, OSHA enforces a 40-year-old permissible exposure limit (PEL) for beryllium in general industry, construction, and shipyards, which does not adequately protect workers against health effects, especially CBD. This session will explore the historical context and epidemiology of occupational beryllium exposure and disease, as well as the current understanding of the mechanisms of health effects and the current state of diagnosis and treatment of CBD, from the viewpoint of both physician and patient. This session will not
only be relevant to the current OSHA beryllium standard, but will present an approach that can translate science into policy that should be applied to other occupational hazards. This session may be of particular interest to residents and recent graduates.

**Session 220: Compliance, Compassion, and Company: Differing Perspectives on Effective Return-to-Work Practices** ........................................ CME/MOC: 1.5

**TRACK: OEM Clinical Practice**

Kate Bischoff, SHRM-SCP, SPHR, tHRive Law & Consulting, LLC, Minneapolis, MN
Rebecca Briley, SHRM-SCP, EFCU Financial Federal Credit Union, Baton Rouge, LA
Peter Matos*, DO, MPH, FACOEM, FACPM, Traekos Health, Amana, IA

This session brings together experts in human resources, occupational medicine, and legal to present the perspectives of business, health, and compliance on effective return-to-work practices. The human resources perspective will describe the importance of adhering to a policy that focuses on the organization's mission and purpose while also following the law. An outline a successful FMLA process will be described. The perspective of the health care provider will emphasize the importance of good communication among all stakeholders, as well as access to expert occupational medicine physicians and active case management. The legal perspective outlines the laws that organizations must be aware of and the obligations that they have when bringing employees back to work. Return-to-work scenarios with practical applications will be discussed.

**3:30pm-5:00pm**

**Session 221: Creating Your Own OEM Elevator Pitch** ........................................... CME/MOC: 1.5

**TRACK: Management and Administration in OEM**

Kent W. Peterson*, MD, FACOEM, Occupational Health Strategies, Charlottesville, VA

Can you confidently explain your work to a stranger during a 2-minute ride up an elevator? Can you gain attention, interest, and understanding in your profession in a few short sentences? Can you help your staff quickly explain to a caller what your office does? This hands-on workshop will guide you step-by-step through a process to create your own 2-minute OEM TED Talk. Come prepared to learn, create, coach and be coached, speak, critique and be critiqued, and triumphantly exhort your essence. You will leave with simple, powerful tools for self expression and your personally crafted OEM elevator pitch. If you are a star, you may win a spot on ACOEM’s website. Participants only; not for observers.

**Session 222: Multi-pronged Approach for Addressing Opioid and Chronic Pain Management in Colorado** ........................................ CME/MOC: 1.5

**TRACK: OEM Clinical Practice**

Richard Garrett May, MD, Pinnacol Assurance, Denver, CO
Kathryn Mueller*, MD, FACOEM, University of Colorado Anschutz Medical Campus, Aurora, CO
Liliana Tenney, MPH, Center for Health, Work & Environment, Colorado School of Public Health, Aurora, CO
Robert Valuck, PhD, RPh, FNAP, University of Colorado School of Pharmacy, Aurora, CO

Prescription drug misuse and abuse is a serious problem both nationally and in Colorado. Each year, overdose deaths from opioid painkillers alone number approximately 17,000 nationally and 300 in Colorado. Such deaths are now more common than alcohol-related traffic fatalities. The CDC calls prescription drug overdose deaths one of the four most serious epidemics facing the nation. Enough opioid painkillers are dispensed by pharmacies in the US to supply each and every American citizen with enough pills to take one every four hours, around the clock, for a month. To address this problem, Colorado convened experts from across the state to create the Colorado Plan to Reduce Rx Abuse and a consortium, which addresses public awareness, naloxone, disposal, surveillance, and provider and prescriber education. This session will discuss the statewide efforts and impact that has resulted from policies, workers’ compensation, provider training, and new guidelines.
CONCURRENT SESSIONS

MONDAY, APRIL 24, 2017
3:30pm-5:00pm

Session 223: Psychological Fitness-for-Duty Toolkit for Occupational Medicine: Threat Preparedness, Assessment, and Response .................................................. CME/MOC: 1.5
TRACK: OEM Clinical Practice

Michael Coupland*, Rpsych, IMCS Group, Inc., West Palm Beach, FL
Les Kertay*, PhD, ABPP, FIAIME, R3 Continuum, Chattanooga, TN
Michael J. Levine*, MD, MPH, FACOEM, Occupational Medical Consultant, Williamsburg, VA

The occupational medicine physician is the gatekeeper in the preparedness and response to threats in the workplace. This includes employees who display behavior that is deemed to be threatening, from the employee’s family members or significant others that bring domestic violence into the workplace, to non-employee violence or threat of violence that impacts the workplace. This presentation will guide participants in developing a plan, starting with a preparedness audit for the identification, referral triggers, and the preparation and report responses for undertaking a threat assessment psychological fitness-for-duty referral. The Psychological Fitness for Duty Toolkit will be updated with threat assessment referral triggers, case identifiers, and referral letters and forms. A threat response section will present the interventions that may be required arising from a threat arising from a threat assessment fitness for duty or arising from other workplace triggers.

Session 224: Promising Practices to Promote Commercial Driver Wellness .................................................. CME/MOC: 1.5
TRACK: Management and Administration in OEM

Natalie P. Hartenbaum*, MD, MPH, FACOEM, OccuMedix, Dresher, PA
Pamela Hymel*, MD, MPH, FACOEM, Walt Disney Parks and Resorts, Anaheim, CA
Michele D. Smith, PhD, MSN, CRNP, Erickson Living - Ann's Choice, Warminster, PA
Craig D. Thorne*, MD, MPH, FACOEM, Erickson Living, Baltimore, MD

Commercial motor vehicle (CMV) operators are expected to meet specific federal medical standards. It has been long recognized that as a population, CMV operators are at high risk for many medical conditions which could impact their certification as well as their long-term health and productivity. Some medical examiners may be able to play a dual role in the process, serving both as a certifying examiner and at the same time being able to actively promote health and wellness in their driver population. This session will highlight many of the wellness opportunities and tools available that occupational health professionals may utilize to promote better health and wellness for drivers. Presenters include experts in commercial driver medical requirements and employee health, wellness, and lifestyle management. Specific promising practice examples from companies that have proactively instituted driver wellness programs will be presented.

Session 225: The New OSHA Silica Standard... CME/MOC: 1.5
TRACK: Regulatory, Legal, Military, and Governmental OEM

Kathleen Fagan*, MD, MPH, FACOEM, OSHA, Washington, DC
Robert Harrison*, MD, MPH, University of California, San Francisco, CA
Paul J. Papanek*, MD, MPH, FACOEM, Cal/OSHA, Long Beach, CA

The newly enacted OSHA silica standard takes effect in mid-2017 and includes new requirements for employers who may be clients of occupational medicine providers, along with new requirements for medical surveillance. This session will outline the background information about the reason for the standard’s adoption, key elements of the standard, and controversies involved with surveillance exams of workers with findings consistent with various stages of silicosis, including TB screening, additional consults, and the longitudinal use of imaging studies. This session may be of particular interest to residents and recent graduates.

Session 226: Gulf War Illness: Clinical and Research Recommendations and Controversies .......... CME/MOC: 1.5
TRACK: OEM Clinical Practice

J. Wesson Ashford, MD, PhD, VA Palo Alto Health Care System, Palo Alto, CA
Erin K. Dursa, PhD, MPH, Department of Veteran Affairs, Washington, DC
Victor F. Kalasinsky, PhD, Department of Veteran Affairs, Washington, DC
Peter D. Rumm, MD, MPH, FACPM, Post-Deployment Health Services, Department of Veteran Affairs, Washington, DC

Since the 1991 Gulf War, more than 30% of Gulf War veterans have presented to clinicians with a myriad of unexplained symptoms known commonly as Gulf War illness (GWI). This session will introduce this condition, also known as chronic multisymptom illness (CMI), and discuss ongoing differences in opinion on diagnosis and treatment. It will cover the main recommendations from the most recent Institute of Medicine Report: Gulf War and Health: Volume 10: Update of Health Effects of Serving in the Gulf War, 2016. It will explain how the VA Research Advisory Committee on GWI, veterans advocacy groups, and internal VA experts have agreed with or proposed alternatives to the IOM recommendations to assure that scientists and clinicians address
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the most appropriate directions for research and treatment. The session will also present cutting-edge research in this field, research the VA is funding or considering conducting, and how such research might change clinical practice.

5:15pm-6:15pm

Session 227: ACOEM's Maintenance of Certification, Part IV . CME/MOC: 1.0
TRACK: Other
Clare Bonnema, MLIS, American Board of Preventive Medicine, Chicago, IL
Denece Kesler*, MD, MPH, FACOEM, University of New Mexico, Albuquerque, NM

As one of the four parts required for recertification under Maintenance of Certification, ABPM diplomates are required to complete a practice performance assessment, also known as Part IV. This component utilizes a quality improvement model with opportunities for assessment of practice performance and improvement activities available in clinical practice, teaching, research, and administration. This session will cover ACOEM's Part IV program.

Session 228: So, You Want to Be an ACOEM Leader? CME/MOC: 1.0
TRACK: Other
Robert M. Bourgeois*, MD, MPH, FACOEM, Bourgeois Medical Clinic, Morgan City, LA
Barry S. Eisenberg*, CAE, ACOEM, Elk Grove Village, IL
Stephen A. Frangos*, MD, MPH, FACOEM, Chevron Corporation, Houston, TX
Nelson S. Haas*, MD, MPH, MA, FACOEM, Workplace Health, Augusta, ME
Paul J. Papanek*, MD, MPH, FACOEM, Cal/OSHA, Long Beach, CA
Tanisha K. Taylor*, MD, MPH, FACOEM, Barnabas Health Corporate Care, Lakewood, NJ

Experienced ACOEM members will share information on their journey in ACOEM and will share leadership tips that will help participants identify ways for further engagement in ACOEM. This session may be of particular interest to residents and recent graduates.

Session 229: Firearm Injury: Facts, Myths, and What Science Tells Us CME/MOC: 1.0
TRACK: OEM Education and Scientific Research
Garen Wintemute, MD, MPH, University of California, Davis, CA

Gun violence is a public health issue of grave significance, yet many doctors are misinformed – e.g., “Gag Laws” prohibiting physician-patient discussion of gun issues are largely a myth. Founding director of the University of California, Davis Violence Prevention Research Program, Dr. Garen Wintemute, will discuss what peer-reviewed research shows on firearm injury, including basic epidemiology, preventive strategies, and what evidence exists for interventions such as comprehensive background checks, criteria for denial of access to firearms, etc. The session will distinguish what is based on strong evidence, what is reasonable/educated guessing, and what is unfounded, myth, or just plain wrong. It will explore promising areas for potential policy intervention and how doctors in practice might apply potential interventions in clinical settings. Come learn the facts.

Session 230: A Guide for the Primary Care Physician in Evaluating Disocyanate-Exposed Workers CME/MOC: 1.0
TRACK: OEM Clinical Practice
David I. Bernstein, MD, University of Cincinnati College of Medicine, Cincinnati, OH
Athena T. Jolly*, MD, MPH, FACOEM, UPMC Susquehanna, Williamsport, PA
Mark W. Spence, MD, International Isocyanate Institute, Inc., Midland, MI

Occupational health care providers are often asked to evaluate workers exposed to diisocyanates who are presenting with lower respiratory symptoms at work for respiratory sensitization to diisocyanates. In this scenario, providers need to consider a differential diagnosis that includes non-asthmatic etiologies, aggravation of a pre-existing asthmatic condition, and irritant induced asthma, and which objectively confirms the correct diagnosis using accessible clinical tools. This guide has been developed with the objective of assisting primary care providers, not experienced in the evaluation of occupational lung, to perform an initial evaluation of workers with suspected diisocyanate-related occupational asthma. The guide describes a variety of work-related asthma conditions that must be considered and provides a step-wise approach to the evaluation of work-related asthma. Limitations of this approach will be identified and the importance of an expert assessment by an industrial hygienist presented.
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MONDAY, APRIL 24, 2017

5:15pm-6:15pm

Session 231: Conversion Disorder and Function Neurological Conditions .................................. CME/MOC: 1.0
TRACK: OEM Clinical Practice

Jonathan Rutnich*, MD, MPH, FACOEM, University of California, San Francisco, CA

This session will review cases of patients with confusing clinical pictures, as well as identifying clinical pearls, diagnostic algorithms, and treatment protocols to help practitioners in these challenging situations. In addition, industrial causation and disposition will be discussed and neuropsychological assessment will be included in this didactic session.

Session 232: IOMSC: Update and Future Directions ....................... CME/MOC: 1.0
TRACK: Other

Richard Heron*, MD, FRCP, FACOEM, BPplc, London, England
Herman Spanjaard*, MD, Arboconsult, Halfweg, Netherlands

The International Occupational Medicine Society Collaborative (IOMSC) is a medical and scientific organization that provides an assembly for representatives of occupational and environmental medicine societies worldwide to: address and collaborate on issues of concern and opportunities; advance the specialty of occupational and environmental medicine; and promote the provision of evidence-based occupational and environmental medicine. The IOMSC has grown from 18 countries participating in 2013 to over 30 countries participating today—representing nations in 6 of the 7 continents. At its fourth annual meeting, members of the IOMSC endorsed a Constitution as a framework to move forward. The IOMSC is developing a business plan to foster continued growth of the organization. In addition to an update, this Session will provide an overview of some of the challenges and opportunities we share around the world as well as the potential projects and future directions of the IOMSC.

7:00pm-9:00pm

Offsite Social Event
Your registration fee includes this event. Details to be announced. Guest tickets are available for $45.
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Speaker Designation: Speakers who are members of ACOEM are indicated with an asterisk (*) throughout this program. The College would like to take this opportunity to recognize their contribution to ACOEM.

TUESDAY, APRIL 25, 2017

7:45am-12:00pm

Session 801: Denver Fire Academy
Worksite Visit ..................................................... CME/MOC: 3.0
TRACK: OEM Clinical Practice

Fabrice Czarnecki¹, MD, MA, MPH, FACOEM, Transportation Security Administration, Arlington, VA
Alisa M. Koval¹, MD, MPH, MHSA, Denver Health/COSH, Denver, CO
Daniel G. Samo¹, MD, FACOEM, Northwest Medical Group, Chicago, IL

Participants will experience components of the most widely used pre-placement functional evaluation, the Candidate Physical Abilities Test, and will have the opportunity to climb stairs, drag hoses, carry equipment, force entry, raise ladders, drag dummies, breach ceilings, and experience what firefighters should be able to do as part of their academy training. The tour of the training facilities will allow participants to learn more about the demands of a firefighting occupation and have an opportunity to discuss with expert trainers the policies, practices, and procedures used to safely train effective firefighters, including NFPA 1582. This worksite visit was coordinated by the Public Safety Medicine Special Interest Section. Attendees must wear long pants; loose, comfortable, breathable clothing for under fire gear; and closed-toed athletic shoes (gym shoes acceptable). Worksite visits are open to registered attendees only and are considered to be educational activities and not social events or tours. An additional non-refundable fee and advance registration is required. Please note that worksite visits are non-refundable, non-transferable activities.

8:30am-10:00am

Session 301: The Ludlow Massacre and Beyond: Occupational Medicine and Corporate Welfare in Early 20th Century Colorado .............................................. CME/MOC: 1.5
TRACK: Other

Victoria Miller, Steelworks Center for the American West, Pueblo, CO
Fawn-Amber Montoya, MD, Colorado State University, Pueblo, CO
Jonathan Rees, MD, Colorado State University, Pueblo, CO

This session will summarize and discuss the implications for occupational medicine of the Ludlow Massacre, the culmination of the great Colorado Coalfield War of 1913-1914. John D. Rockefeller, Jr., the primary owner of the Colorado Fuel and Iron Company, used this dispute as a reason to increase many aspects of that firm’s corporate welfare program including its pioneering medical programs. The ramifications of those actions echo through the American industrial landscape down to this day.

Session 302: Drilling Down: US Oil and Gas Extraction Worker Safety and Health Trends and Current Issues ................................................................. CME/MOC: 1.5
TRACK: OEM Education and Scientific Research

Robert Harrison¹, MD, MPH, University of California, San Francisco, CA
Bradley S. King, PhD, MPH, CIH, CDC/NIOSH, Denver, CO
Kyla Retzer, MPH, CDC/NIOSH, Denver, CO
Sadie Sanchez¹, MD, MPH, Denver Health Center for Occupational Safety and Health, Denver, CO

The on-shore oil and gas extraction (OGE) industry recently experienced a boom period with the workforce doubling 2004-2014. Despite a downward trend in the OGE worker fatality rate during this time, the fatality rate remained seven times higher than in the general industry and was also elevated when compared to similar industries (construction, transportation). This session will provide an overview of the epidemiology of OGE worker fatalities and injuries and will review current knowledge of occupational exposures in the industry. Faculty will discuss a series of worker deaths (n = 10) specifically related to hydrocarbon gas and vapor exposures and low oxygen concentration environments, a hazard not previously documented in the oilfield. Signs and symptoms of exposure to hydrocarbons will be reviewed as well as how occupational health providers and other professionals can play a role in improving health and safety for the oil and gas workforce.
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TUESDAY, APRIL 25, 2017

8:30am-10:00am

Session 303: Hazardous Drug Workplace Safety and Compliance ........................................................ CME/MOC: 1.5
TRACK: Environmental Health and Risk Management

Thomas H. Connor, PhD, NIOSH, Cincinnati, OH
Elizabeth Mease*, MD, MBA, FACOEM, Louis Stokes Cleveland VA Medical Clinic, Cleveland, OH
Vaiyapuri Subramanian, PharmD, MS, FCP, FASHP, FASCP, Veterans Health Administration, Silver Spring, MD

This session will review challenges and opportunities in the implementation of an effective hazardous drug safety program in a large hospital network system. A NIOSH scientist, a pharmacist, an industrial hygienist, and a physician from the VHA will provide updates on the following topics: scientific information; requirement of <USP 800>; updates in safe handling guidance (OSHA, NIOSH, ACHP, ONS); appropriate engineering controls; PPE requirements; compounding and administration issues; disposal requirements; wipe sampling issues; development of an alternative duty fertility protection policy; and implementation of a hospital hazardous drug committee.

8:30am-12:00pm

Session 304: Commercial Driver Medical Examinations: Where They Are, Where They Are Going ..........CME/MOC: 3.0
TRACK: OEM Clinical Practice

Natalie P. Hartenbaum*, MD, MPH, FACOEM, OccuMedix, Dresher, PA
Kurt Hegmann*, MD, MPH, FACOEM, Rocky Mountain Center for Occupational and Environmental Health, University of Utah, Salt Lake City, UT
Charles A. Horan III, Federal Motor Carrier Safety Administration, Washington, DC
Christine Hydock, Federal Motor Carrier Safety Administration, US Department of Transportation, Washington, DC
Matthew S. Thiese*, PhD, MSPH, University of Utah, Salt Lake City, UT

This session will provide an update on the National Registry of Certified Medical Examiners and other issues that affect the commercial driver medical examiner. Recent research on medical issues and commercial drivers will be reviewed. A panel will provide an opportunity for attendees to question experienced examiners and a representative from FMCSA on issues important to the commercial driver medical examiner. Questions to be addressed by the panel can be submitted to CDME16@gmail.com at least 48 hours prior to the session. This session was organized by the Transportation Special Interest Section.

TRACK: Environmental Health and Risk Management

Perry Gottesfeld, MPH, Occupational Knowledge International, San Francisco, CA
Michael J. Kosnett, MD, MPH, Colorado School of Public Health, Denver, CO
Paul J. Papanek*, MD, MPH, FACOEM, Cal/OSHA, Long Beach, CA
Norbert L. Wagner*, MD, PhD, FACOEM, National University of Singapore, Singapore
Jean Xiao*, MD, MSC, MS, FACOEM, Waterfront Medical Services, PC, New York, NY
Xia Zha-Ilm, MD, MS, PhD, Fudan University School of Public Health, Shanghai, China

This session will showcase the impacts of environmental and workplace rule making, trade policy, and employer policies on the health of populations exposed to lead in the US and abroad. The session will demonstrate the strong ties that exist between developed and developing countries in terms of trade and regulation and the effect on the burden of disease due to lead poisoning. Additionally, the session will explore possible areas of collaboration between ACOEM and IOMSC in lowering global exposures to lead. Topics of discussion will include specific examples of regulatory policy that are likely to impact worldwide lead exposures: the role of US and Canadian regulations in exporting hazardous industries; economic impact of global lead poisoning; global initiatives to ban lead paint, gasoline and other products; potential global impacts of updating the OSHA lead standard; and impacts of lead manufacturing and recycling in China. This session was organized by the International Special Interest Section.

10:30am-12:00pm

Session 306: Unlearning Self-Defeating Thinking Habits: A Proactive Approach ........................................... CME/MOC: 1.5
TRACK: Management and Administration in OEM

David Frances*, PhD, Quadrant Health Strategies, Inc., Beverly, MA

OEM promotes good nutrition, regular exercise, and healthful habits to prevent illness and injury. But OEM practitioners have lacked the tools to actively address one major contributor to health and productivity problems: common mental health disorders, estimated to cost American business at least $225 billion/year. This session will present research-based concepts...
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to address these problems in the workplace and introduce evidence-based techniques for self-improvement and demonstrate a stigma-free training program by which to educate receptive corporate audiences. This session will review benefits and shortcomings of traditional efforts to address mental health issues in the corporate environment; present 50 years of research supporting the concept of cognitive health; describe how irrational, self-defeating thinking habits can be identified and unlearned; and demonstrate a lunch-and-learn program on cognitive health that has been piloted successfully at two global companies.

Session 307: ACOEM Court: You Be the Judge! CME/MOC: 1.5
TRACK: Regulatory, Legal, Military, and Governmental OEM
Laurence John Free, Esq., Keating, Wagner, Polidori & Free, Denver, CO
Paul Krueger, JD, Ritsema & Lyon, PC, Denver, CO
Michael J. Levine*, MD, MPH, FACOEM, Occupational Medical Consultant, Williamsburg, VA
Francesca K. Litow*, MD, MPH, FACOEM, Norfolk Southern Corporation, Norfolk, VA
X. J. Ethan Moses*, MD, MPH, Peak Form Medical Clinic, Brighton, CO
Sadie Sanchez*, MD, MPH, Denver Health Center for Occupational Safety and Health, Denver, CO

This session will present workers’ compensation cases based on case files (or presenting facts that mimic what has occurred in files, adjusted to maximize educational value), wherein faculty will portray the roles of claimant’s attorney, a defense attorney and physical defending/explaining the position taken with regard to restrictions, maximum medical improvement, accommodations in the workplace, or other issues impacting fitness to return to work. Participants will be engaged and will “vote” as to their “ruling” on each case, based upon the information presented. The faculty will then present and discuss the actual court decision(s) pertinent to each case. Although cases will be drawn from Colorado case files, the information presented will be based upon principles common to workers’ compensation law in general and not limited to Colorado.

Session 308: Hazardous Drug Exposure and Medical Surveillance........................................................ CME/MOC: 1.5
TRACK: OEM Education and Scientific Research
Melissa McDiarmid*, MD, MPH, DABT, FACOEM, University of Maryland School of Medicine, Baltimore, MD
Richard D. Newcomb*, MD, MPH, FACOEM, Mayo Clinic, Rochester, MN
Mark Russi*, MD, MPH, FACOEM, Yale new Haven Health System, New Haven, CT
Melanie Swift*, MD, FACOEM, Vanderbilt University Medical Center, Nashville, TN
Marcelo Targino*, MD, MPH, FACOEM, FACP, Johnson & Johnson, New Brunswick, NJ

Hazardous drug handling entails well recognized and common occupational exposure risks for health care and pharmaceutical personnel in a range of workplaces. Environmental controls may not fully mitigate exposure risk, particularly in health care settings, and medical surveillance for hazardous drug handlers is recommended in national guidelines. However, the specificity and clinical value of surveillance tests are controversial. The session will include evidence for current recommendations, analysis of risks and value for specific tests, evaluation of current surveillance practices in health care and pharmaceutical populations, and operational challenges in medical surveillance. This session was organize by the Medical Center Occupational Health Special Interest Section, in conjunction with the Physicians in the Pharmaceutical Industry Special Interest Section.

1:30pm-3:00pm

Session 309: Current Issues Affecting the Health and Safety of Underserved Occupational Populations in the US and Abroad............................................................ CME/MOC: 1.5
TRACK: Other
Xochitl Castaneda, MA, Health Initiative of the Americas, School of Public Health, University of California, Berkeley, CA
Bruce Goldstein, JD, Farmworker Justice, Washington, DC
Scott Morris*, MD, MPH, FACOEM, Valley Medical Center of the University of Washington, Seattle, WA
Michael O’Malley*, MD, University of California, California Department of Pesticide Regulations, Davis, CA
Molly Tran*, MD, MPH, MA, FACOEM, State University of New York-Downstate School of Public Health, Brooklyn, NY

This session will explore current issues affecting the health and safety of different underserved occupational populations in the US and abroad. It will also review some of the relevant legal and regulatory changes faced by this marginalized group of workers. Additional populations will include those caught up in human trafficking and bicycle transportation workers. Clinical, toxicological, regulatory, and legislative issues involving pesticide monitoring and skin cancer will also be addressed. This session was organized by the Underserved Occupational Populations Special Interest Section.
CONCURRENT SESSIONS

TUESDAY, APRIL 25, 2017

1:30pm-3:00pm

**Session 310: Interaction of Health Care Worker Health and Safety on Patient Health and Safety**

* CME/MOC: 1.5
* TRACK: Management and Administration in OEM

Stephen A. Frangos*, MD, MPH, FACOEM, Chevron Corporation, Houston, TX
T. Warner Hudson*, MD, FACOEM, FAAFP, UCLA Health System and Campus, Los Angeles, CA
E. Andrew Kapp*, PhD, CSP, CHMM, Underwriters Laboratories, Inc., Northbrook, IL
Robert K. McLellan*, MD, MPH, FACOEM, Dartmouth-Hitchcock Medical Center, Lebanon, NH

There is growing agreement that the health and safety of patients is inextricably linked to the health and safety of health care workers. Therefore, health care employers need to put a new emphasis on ensuring the health and safety of their own workers. It requires striving to achieve greater parity of resources, alignment of workplace incentives, institutional commitment, and a new focus on accountability for healthy and safe employee environments beginning with senior leadership. ACOEM and Underwriters Laboratories, Inc., convened a summit to identify recommendations for both how best to integrate worker and patient health and safety programs and how to evaluate the effectiveness of these programs. This session will review these recommendations and provide examples from hospital and health care systems to demonstrate how some employers are beginning to construct models that promote this new vision for health care worker safety and wellness. This session was organized by the Health and Productivity Special Interest Section.

**Session 311: Evidence-Based Workers’ Compensation (WC) Management**

* CME/MOC: 1.5
* TRACK: Management and Administration in OEM

Edward J. Bernacki*, MD, MPH, FACOEM, Dell Medical School, Austin, TX
Heather Holt Kraus, Esq., Semmes, Bowen & Semmes, Baltimore, MD
Nimisha Kalia-Satwah*, MD, MPH, MBA, Johns Hopkins University, Baltimore, MD
Robert Alan Lavin, MD, MS, University of Maryland School of Medicine, Baltimore, MD
Xuguang (Grant) Tao*, MD, PhD, Johns Hopkins School of Medicine, Baltimore, MD
Larry Yuspeh, Johns Hopkins University School of Medicine, Baltimore, MD

This session will address recent trends in WC injuries and WC cost; development of predictive models for WC cost using epidemiological/bio-statistic tools; impact of opioid, benzodiazepines, sedatives, and antidepressants on WC cost; early use and discontinuation of opioids may be associated with better outcomes; and beneficial impact of occupational clinics on injuries and WC cost. This session may be of particular interest to residents and recent graduates.

1:30pm-5:00pm

**Session 312: Public Safety Medicine Update 2017: The Cutting Edge**

* CME/MOC: 3.0
* TRACK: OEM Clinical Practice

Christina Cusic*, MD, MPH, Professional Disability Associates, New York, NY
Fabrice Czarnecki*, MD, MA, MPH, FACOEM, Transportation Security Administration, Arlington, VA
Michael J. Levine*, MD, MPH, FACOEM, Occupational Medical Consultant, Williamsburg, VA
Patrick McKenna, DO, MPH, US Navy, Norfolk, VA
Richard J. Miller*, MD, Peachtree, GA
Daniel G. Samo*, MD, FACOEM, Northwest Medical Group, Chicago, IL

This session is designed to present the most up-to-date medical guidance, controversies, and central issues surrounding the evaluation and care of firefighters, law enforcement officers (LEOs), and emergency medical service workers. There will be an overview of updates to ACOEM’s *Guidance for the Medical Evaluation of Law Enforcement Officers*. Specific clinical cases of how the Guidance has been used for evaluation of LEOs with various medical conditions including spine conditions, hip injuries, and psychiatric issues will be presented. There will be a discussion of the extensive updates to NFPA 1582 and how to use the document to evaluate firefighters with conditions such as cardiac enlargement and heat stress. There will also be time for a presentation on any late-breaking topics, as well as a question and answer session for discussions with leading public safety medicine practitioners. This session was organized by the Public Safety Medicine Special Interest Section.

**Session 313: Inhalational Hazards and Respiratory Health Effects from Post 9/11 Deployment to Southwest Asia**

* CME/MOC: 3.0
* TRACK: OEM Clinical Practice

CONCURRENT SESSIONS

Drew A. Helmer, MD, MS, War Related Illness and Injury Study Center, VA-NJHCS, East Orange, NJ
Silpa Dhoma Krefft*, MD, MPH, National Jewish Health, Denver, CO
Geoffrey S. Plumlee, PhD, US Geological Survey, Reston, VA
Cecile S. Rose*, MD, MPH, National Jewish Health, Denver, CO

This session will provide an overview of inhalational hazards (desert dust particulate matter, burn pit emissions, fuel combustion products) that military personnel and civilian contractors frequently encounter during post-9/11 deployment to Iraq, Afghanistan, and other regions in southwest Asia. This session also will feature discussions of epidemiology and clinical manifestations of the emerging spectrum of post-9/11 deployment-related respiratory diseases such as asthma and bronchiolitis. Clinicians and researchers from the military and civilian sectors will present updates from the ongoing VA Airborne Hazards and Open Burn Pit Registry, current prevention efforts, disease detection and management recommendations, and future research needs.

3:30pm-5:00pm

Session 314: Migration and Work: Understanding Populations in the Americas and the US........ CME/MOC: 1.5
TRACK: Other
Linda Forst*, MD, MS, MPH, University of Illinois, Chicago, IL
Matthew Keifer*, MD, MPH, Medicine and Public Health University of Washington, Seattle, WA
Jorge A. Morales Camino*, MD, MS, PhD, FACOEM, Proctor & Gamble, Cuajimalpa de Morelos, Mexico
Julietta Rodriguez Guzman*, MD, SOH, MScA, Pan-American Health Organization, World Health Organization, Washington, DC
Norbert L. Wagner*, MD, PhD, FACOEM, National University of Singapore, Singapore

This session will address the special health and safety issues experienced by immigrant US workers in the construction and health care industries. It will present the population demographics, health and safety hazards, and examples of prevention programs targeted to these groups. Recommendations for addressing acute and chronic occupational illnesses and injuries in these underserved occupational populations will be presented. This session was organized by the Underserved Occupational Populations Special Interest Section, in conjunction with the International Special Interest Section.

Session 315: Communicating Effectively with Non-Occupational Health Colleagues on Differing Opinions in Managing Fitness-for-Duty and Return-to-Work................................. CME/MOC: 1.5
TRACK: Management and Administration in OEM
Philip Adamo*, MD, MPH, FACOEM, Baystate Health, Springfield, MA
Gladys L. Fernandez, MD, Baystate Medical Center, Springfield, MA
Michael J. Levine*, MD, MPH, FACOEM, Occupational Medical Consultant, Williamsburg, VA

Simulation-based education has become a part of health care training, assessment of performance, and team-based competency evaluations nationally and internationally. The role of simulation for teaching and assessing knowledge, skills, and behaviors has been described and effectively implemented across undergraduate and graduate academic centers for more than a decade. The body of evidence supporting this as an adjunct for educating and evaluating new skills, assessing retention of skills, and maintenance of proficiency is increasing and this is the basis for much of the ongoing training. Simulation can be a supportive adjunct to the assessment of effectiveness and identification of needs and challenges as well as training and remediation of skills related to challenging interpersonal communications, conflict resolution, and team-based approaches to patient care. This session will include role play scenarios for audience engagement. This session was organized by the OEM Practice Council.
CONCURRENT SESSIONS

TUESDAY, APRIL 25, 2017

3:30pm-5:00pm

Session 316: Partnering with Workers’ Compensation Insurers to Reach Small Enterprises in Need of Health Promotion and Health Protection .................... CME/MOC: 1.5
TRACK: Management and Administration in OEM

Karen Curran, Pinnacol Assurance, Denver, CO
Lee S. Newman*, MD, FACOEM, Center for Worker Health and Environment, Colorado School of Public Health, Denver, CO
Natalie Schwatka, PhD, Center for Health, Work & Environment, Colorado School of Public Health, Aurora, CO
Erin Shore, MPH, University of Colorado, Aurora, CO
Liliana Tenney, MPH, Center for Health, Work & Environment, Colorado School of Public Health, Aurora, CO

The literature supplies evidence on the impact of employee health on productivity and traditional health care costs, but does it also impact workers’ compensation costs and claims? Additionally, health promotion programs may succeed in mid- to large-size companies, but what can be done to reach the small enterprises where the majority of Americans work? This session will examine the nexus of workers’ compensation, health promotion, and small businesses by presenting three studies that illustrate innovative approaches. Topics will include the impetus for promoting worker well-being from the perspective of Pinnacol Assurance, Colorado’s major workers’ compensation carrier and the interaction between work organization, workers’ personal health, and workers’ compensation claims and costs. Data from a successful dissemination program for small businesses that applies Total Worker Health® principles “scaled” to improve adoption and success will be discussed.

5:15pm-6:15pm

Session 317: Neurological Fitness-for-Duty .... CME/MOC: 1.0
TRACK: OEM Clinical Practice

Jonathan Rutchik*, MD, MPH, FACOEM, University of California, San Francisco, CA

This session will cover recent and timely cases of police officers, firefighters, commercial drivers, aviation, and other safety-sensitive individuals who have neurological diagnoses. Such diagnoses include head injuries, headaches, seizures, strokes, mental incapacitation, limb pain, tremors, and neurodegenerative disorders. Discussion will include the various recommendations and regulations in order for practitioners to assist employers in the return-to-work process while considering the American Disabilities Act. This session may be of particular interest to residents and recent graduates.

Session 318: Mitigating the Health Risk of Hydrogen Sulfide and Other Workplace Hazards in Oil and Gas Production...... CME/MOC: 1.0
TRACK: Environmental Health and Risk Management

Michael S. McKee, PE, Caerus Oil and Gas, LLC, Denver, CO

Workplaces hazards abound in the exploration for and production of oil and gas. These hazards can range from pressurized lines and equipment to explosions and fires to exposure of hazardous vapors such as hydrogen sulfide. This session will present an overview with a specific discussion of current best practices regarding the mitigation of exposure to hydrogen sulfide, a particularly dangerous substance that can be present in oil and gas work. Specific case reports will highlight best practices to mitigate workplace hazards, with emphasis on the mitigation of hydrogen sulfide in the corporation’s operation on the western slope of Colorado. The speaker is the environmental, health and safety manager for a private oil and gas production corporation in Denver.

Session 319: Patient Satisfaction Measurement in OEM ................................................................. CME/MOC: 1.0
TRACK: Management and Administration in OEM

Douglas Wayne Martin*, MD, FACOEM, FAAFP, FIAIME, Unity Point Clinic – St. Luke’s Occupational Medicine, Sioux City, IA
Glenn Pransky*, MD, MOccH, FACOEM, Liberty Mutual Research Institute, Hopkinton, MA
Matthew S. Thiese*, PhD, MSPH, Rocky Mountain Center for Occupational and Environmental Health, University of Utah, Salt Lake City, UT

Patient satisfaction measures are increasingly used to evaluate and improve quality in all types of medical practices. With these tools, it is important that they be appropriately designed for the practice and adequately tested to ensure that they reflect and promote quality care and do not create financial incentives that may lead to lower quality or excessive medical care. The unique aspects of OEM practice require development of OEM-specific measures and thoughtful interpretation of results. Several unique features of OEM practice (work status as a primary outcome, potential conflicts between employer and patient interests, medico-legal context of work injuries; performance of regulatory examinations, and others) create OEM-specific concerns which imply a need for an OEM-specific approach to patient satisfaction assessment. This session will review the background, development, and current status of the ACOEM Patient Satisfaction Survey Tool. This session was organized by the Private Practice in Occupational Medicine Special Interest Section.
CONCURRENT SESSIONS

Session 320: US Military OEM Update .......... CME/MOC: 1.0
TRACK: Regulatory, Legal, Military, and Governmental OEM

Col Jon R. Jacobson, DO, MPH, US Air Force, Falls Church, VA
Pamela L. Krahl*, MD, MPH, US Navy/Uniformed Services
University of the Health Sciences, Bethesda, MD
William A. Rice*, US Navy/Uniformed Services University,
Bethesda, MD

This session is led by the specialty leaders and consultants for
OEM from each of the US military services and is intended to
familiarize learners with the occupational health programs of
each of the services, highlighting the similarities and differ-
ences in major governing regulations. Greater understanding of
these similarities and differences can benefit OEM practice on
joint installations, provide insight into some of the challenges
of integrating programs on joint bases, and offer suggestions of
possible areas for research to address gaps in knowledge of cur-
rent program status. This session was organized by the Federal
and Military Occupational and Environmental Medicine Special
Interest Section.

Session 321: Is There a Doctor on Board? Preparing for
Airline Medical Events and Emergencies .......... CME/MOC: 1.0
TRACK: Regulatory, Legal, Military, and Governmental OEM

Robert Orford*, MD, CM, MS, MPH, FACP, FACOEM, Mayo Clinic,
Scottsdale, AZ

There were 3.5 billion airline passengers in 2015, with 3-6 report-
ed medical events and emergencies per 1,000 passengers daily.
Physicians or other medically trained personnel on board are fre-
quently asked to assist when a medical event occurs, but often
have little knowledge of what resources are available to them,
and what they should do. Aircrafts carry first-aid kits and expand-
ded medical kits in addition to automated external defibrillators.
Ground-based medical support from the airline medical depart-
ment or from a contracted in-flight emergency medical service
is also normally readily available. In addition to providing assis-
tance for passengers in-flight, occupational health professionals
should be prepared to offer preventive advice to traveling em-
ployees and patients. The Aerospace Medical Association’s Medi-
cal Guidelines for Airline Travel will be discussed. Practical advice
on how to prepare for and respond to medical events on board
an aircraft will be provided.
**WEDNESDAY, APRIL 26, 2017**

**Session 401: Preventing Musculoskeletal Disorders: Screening and Workplace Interventions**

**TRACK: OEM Clinical Practice**

Ibraheem (Abe) Al-Tarawneh, PhD, Ohio Center for Occupational Safety and Health, Pickerington, OH
Bradley A. Evanoff*, MD, MPH, FACOEM, Washington University, St. Louis, MO
David Rempel*, MD, FACOEM, University of California, San Francisco, CA

Post-offer pre-placement (POPP) testing for carpal tunnel syndrome (CTS), low back pain (LBP), and other musculoskeletal disorders (MSDs) is used to prevent workplace injuries. Under this practice, workers with abnormal nerve conduction, radiographs, or other findings are not hired into physically demanding jobs. This presentation will review current evidence on the utility of POPP screening for CTS and LBP. The Ohio Bureau of Workers’ Compensation recently expanded the financial resources and reach of its occupational safety and health programs. The impact has been a reduction of injuries by 13.2%. This session will present some of these programs with case studies exploring their impact. The Safety Intervention Grants Program provides matching funds to businesses for engineering controls to prevent MSDs. Participating businesses reduced the frequency and cost of injuries by 66% and 81%, respectively. This model program has components that should be useful to any size company.

**Session 402: The Role of the Occupational Health Provider in Active Shooter and Bomber Situation**

**TRACK: Management and Administration in OEM**

Matthew Minson*, MD, Superior Energy Services/Texas A&M University, Houston, TX

Recent events in the US and abroad have brought greater attention to the health and medical response considerations for an active shooter or bomb-related incident. Understandably, the majority of emphasis has been focused on emergency service and public safety preparedness and response with an emphasis on integration and preparations. An area of medical practice that may and certainly will play a critical role is occupational health. Such an exploration and discussion, is the purpose of this presentation. Items discussed include top clinical issues associated with mass shooting and bombing issues as per the National Academies of Medicine position paper; medical information sharing with EMS and health care systems (FEMA IS 907) and how regulatory and legal applications (PREP Act, Countermeasures Dispensing, and disaster declarations); direct care considerations, credentialing recommendations; proprietary and civil liability issues; and behavioral health and surveillance.

**Session 403: Getting Your Start in Research**

**TRACK: OEM Education and Scientific Research**

Pamela L. Krahl*, MD, MPH, US Navy/Uniformed Services University of the Health Sciences, Bethesda, MD
Timothy M. Mallon*, MD, MS, MPH, FACOEM, US Navy/Uniformed Services University, Bethesda, MD

Contributing to the medical literature is critical to keep our specialty vibrant with sharing of ideas and advances, yet often, getting started in research can seem like an overwhelming undertaking. Demystify research by learning from three seasoned researchers who will share their experiences and give practical advice on how you can get your start. This session was organized by the Academic Occupational Medicine Special Interest Section. This session may be of particular interest to residents and recent graduates.

**Session 404: Better WC Care through Better Documentation and Coding Requirements**

**TRACK: OEM Clinical Practice**

Marianne Cloeren*, MD, MPH, FACOEM, Managed Care Advisors, Baltimore, MD

The documentation requirements for workers’ compensation care follow rules designed for a different purpose. Clinicians providing and documenting care consistent with evidence-based practice standards are usually not rewarded for this because the coding system does not recognize the different cognitive work needed for good care in workers’ compensation. ACOEM is trying to change this with the publication of a position paper on Defining Documentation Requirements for Coding Quality Care in Workers’ Compensation, and multiple support documents for putting these recommendations into practice. This multi-year effort has gained the interest and support of many industry experts. This session will review the status of this effort, share tools for implementation, and address how ACOEM members can champion this initiative. This session was organized by the Work Fitness and Disability Special Interest Section, in conjunction with the OEM Practice Council.
CONCURRENT SESSIONS

Session 405: Carbon Monoxide Neurotoxicity ...................... CME/MOC: 1.0 TRACK: OEM Clinical Practice
Jonathan Rutchik*, MD, MPH, FACOEM, University of California, San Francisco, CA
David Schretlen, PhD, ABPP-CN, FAPA, Johns Hopkins University School of Medicine, Baltimore, MD

This session will introduce clinical vignettes of carbon monoxide exposures and will present the state of art for this evaluation, including history, physical examination findings, exposure assessment, and neuropsychological testing. The discussion will include the delayed neurological and neuropsychological syndrome, as well as the challenges of neurological and neuropsychological testing with the goals of presenting a guide to be able to confidently separate anxiety, depression, PTSD, progressive dementia, and true neuropsychological abnormality from common normal variant testing results.

8:00am-10:00am
Session 400: Annual Membership Meeting and Awards Presentation Breakfast
CME/MOC: 1.0

This session will feature the annual membership meeting and awards presentations, along with the induction of new ACOEM officers and directors, including ACOEM’s new president.

10:15am-11:15am
Session 406: Exposure, Metabolomics and Biomarkers, and Health Outcomes, Part I ......................... CME/MOC: 1.5 TRACK: Regulatory, Legal, Military, and Governmental OEM
Dean P. Jones, PhD, Emory University, Atlanta, GA
Timothy M. Mallon*, MD, MS, MPH, FACOEM, US Navy/Uniformed Services University, Bethesda, MD
Karan Uppal, PhD, Emory University, Atlanta, GA
Douglas I. Walker, Tufts University, Atlanta, GA

This session will discuss the examination of deployment exposures and describe various metabolomic and environmental biomarkers related to burn pit exposures. This session was organized by the Federal and Military Occupational and Environmental Medicine Special Interest Section.

10:15am-12:30pm
Session 407: Diagnostic and Interventional Treatments for Upper Extremity Injuries Using Musculoskeletal Ultrasound for OEM Physicians ......................... CME/MOC: 2.0 TRACK: OEM Clinical Practice
Bharat C. Patel, MD, DABIPP, DABPMR, FIPP, Deuk Spine Institute, Melbourne, FL
Kristine Swinton Robinson, MD, FACEP, Department of Emergency Medicine, West Virginia University School of Medicine, Morgantown, WV
Yusef Sayeed*, MD, MPH, Meng, CPH, CMRO, Deuk Spine Institute, Rockledge, FL
Michael P. Schaefer, MD, R-MSK, Cleveland Clinic, Cleveland, OH
Keziah Sully, MD, Deuk Spine Institute, Melbourne, FL

This session is specifically designed for health care providers who are exploring musculoskeletal ultrasound to enhance the evaluation and management of the patients with upper limb injury and complaints. Covering the shoulder, elbow, and wrist joints in detail, this course will present a systematic and focused assessment with ultrasound. The session will include both live scanning and when and how to intervene. The participant will develop ultrasound pattern recognition of the major tendons, ligaments, nerves, and muscles surrounding these joints. The case discussions will focus on pathologies that are commonly encountered. In addition, the session will cover regenerative medicine topics including platelet rich plasma, stem cell therapy, and the current state of the evidence.
CONCURRENT SESSIONS

WEDNESDAY, APRIL 26, 2017
10:15am-12:30pm

Session 408: Review and Update of 15 Years of the World Trade Center Health Program .................. CME/MOC: 2.0
TRACK: OEM Clinical Practice

Michael Crane*, MD, MPH, Mount Sinai School of Medicine, New York, NY
Laura E. Crowley, MD, Icahn School of Medicine at Mount Sinai, New York, NY
Jacqueline Moline*, MD, MSc, FACOEM, Northwell Health, Great Neck, NY
Julia Nicolaou, MPH, Icahn School of Medicine at Mount Sinai, New York, NY
Faith Ozbay, MD, Icahn School of Medicine at Mount Sinai, New York, NY

This session will cover aspects of the World Trade Center Health Program (WTCHP) as it is pertinent to the practicing occupational medicine physician. The WTCHP is funded by NIOSH and dedicated to monitoring and surveillance of those responders and volunteers who were exposed to dust and debris at the World Trade Center disaster site. The WTCHP identifies and provides medical care for a range of physical and mental health conditions directly related to this exposure. These diseases include, but are not limited to: rhinitis, sinusitis, gastroesophageal reflux, asthma, chronic obstructive pulmonary disease, interstitial lung disease, traumatic injury, anxiety, depression, and post-traumatic stress disorder. The WTCHP provides medical monitoring and treatment services for WTC-related conditions, benefits counseling, and collects information to identify new potentially WTC-related conditions.

Session 409: Providing a Warm Hand-off: Connecting Safety-Net Providers with Occupational Health Consultation .......................................... CME/MOC: 2.0
TRACK: OEM Education and Scientific Research

Cristina Demian*, MD, MPH, University of Rochester Finger Lakes Occupational Health Services, Rochester, NY
Tillman Farley, MD, Salud Family Health Center, Fort Lupton, CO
Katherine H. Kirkland*, DrPH, MPH, Association of Occupational and Environmental Clinics, Washington, DC
Amy K. Liebman, MPA, MA, Migrant Clinicians Network, Salisbury, MD
Scott Morris*, MD, MPH, FACOEM, Valley Medical Center of the University of Washington, Seattle, WA
Nicholas K. Reul*, MD, MPH, Washington State Department of Labor and Industries, Olympia, WA
Rosemary Sokas*, MD, MOH, FACOEM, Georgetown University, Washington, DC

Low-wage, high-risk working populations often employed at small or marginal enterprises and frequently lack access to occupational health services. However, these workers may have access to safety net primary care through a network of federally qualified health centers and their look-alikes. Primary care clinicians in these settings often feel unprepared to address occupational health, are burdened addressing many other health needs, and are often unaware of existing occupational medicine expertise for referral or curbside consult. Potential resources include occupational health clinic networks in two states, Washington and New York, and occupational health and migrant clinicians network organizations, each of which has implemented programs to facilitate occupational health services. This session will review the needs and resources, examine what works and what doesn’t work, and explore approaches that the Underserved Occupational Populations Special Interest Section or ACOEM might pursue to develop and evaluate solutions. This session was organized by the Underserved Occupational Populations Special Interest Section.
CONCURRENT SESSIONS

Session 411: Medical Marijuana ....................... CME/MOC: 2.0
TRACK: OEM Clinical Practice

Kenneth R. Hosack, MA, Craig Hospital, Englewood, CO
Maria Michas*, MD, MPH, FACOEM, University of Massachusetts Health Care, Worcester, MA
Paul Tauriello, Colorado Division of Workers’ Compensation, Denver, CO

Marijuana is the most commonly used illicit drug in the US and the drug most frequently detected in workplace drug-testing programs. Multiple states have enacted marijuana laws that conflict with federal laws. This session will address the workplace effects of medical and recreational marijuana, including practical responses to challenges and issues related to impairment.

Session 410: Exposure, Metabolomics and Biomarkers, and Health Outcomes, Part II .......................... CME/MOC: 1.5
TRACK: Regulatory, Legal, Military, and Governmental OEM

Phillip K. Hopke, PhD, Clarkson University, Potsdam, NY
Timothy M. Mallon*, MD, MS, MPH, FACOEM, US Navy/Uniformed Services University, Bethesda, MD
Professor Julie Thakar, PhD, University of Rochester, Rochester, NY
Mark Utell*, MD, Strong Memorial Hospital and the University of Rochester, Rochester, NY
Collynn Woeller, PhD, University of Rochester, Rochester, NY

This session will help participants understand the tools used to identify molecular signatures associated with deployment exposures and to identify biological processes and disease pathways that are impacted. The session will discuss epigenetics, microRNAs, and inflammatory biomarkers, and changes to pre- and post-deployment, and the relationship with health outcomes in deployed service members. Advances in large database statistical applications will be examined. This session was organized by the Federal and Military Occupational and Environmental Medicine Special Interest Section.

11:30am-12:30pm
ACOEM
Established in 1916, the American College of Occupational and Environmental Medicine (ACOEM) is the pre-eminent organization of occupational health professionals who champion the health and safety of workers, workplaces, and environments. Its mission is to provide leadership by educating health professionals and the public; stimulating research; enhancing the quality of practice; guiding public policy; and advancing the field of occupational and environmental medicine (OEM). In its leadership role, ACOEM sponsors educational activities for physicians and other health professionals, including courses and the annual spring AOHC.

AOHC 2017
The 2017 American Occupational Health Conference (AOHC) is ACOEM’s 102nd Annual Meeting.

AOHC serves two fundamental purposes: it is the premier professional meeting for physicians and other health professionals who have an interest in the fields of occupational and environmental medicine (OEM); and it is the annual membership meeting for ACOEM’s members.

Educational Needs and Objectives
OEM is the medical specialty devoted to the prevention and management of occupational and environmental injury, illness, and disability, and the promotion of health and productivity of workers, their families, and communities.

ACOEM has identified core competencies in areas where the OEM-trained physician should strive to remain current and serve as a knowledgeable representative of the specialty. The ten core competencies are available at www.acoem.org

The ACOEM CME mission is to provide educational activities that enhance the professional capabilities related directly to the professional work of physicians practicing occupational and environmental medicine and (1) to promote physician lifelong and self-directed learning, (2) to improve worker/patient clinical outcomes, (3) to facilitate physician effectiveness and efficiency in carrying out professional responsibilities, and (4) communicate the value of occupational and environmental medicine.

To address the educational needs of OEM physicians, AOHC is planned within the context of desirable physician attributes and aligned with the OEM core competencies.

AOHC content is designed to enhance physician competence and performance and to improve patient outcomes by providing learner-centered education in the most current issues relevant to the practice of OEM.

Upon completion of AOHC 2017, the learner should be able to:
• evaluate current research;
• analyze emerging issues in OEM; and
• Exemplify effectiveness and efficiency in carrying out professional responsibilities.

Target Audience
AOHC is designed for physicians who specialize in or have an interest in OEM as well as for non-physicians, such as industrial hygienists, nurses, safety professionals, and environmental health specialists who are involved in the field. AOHC offers a variety of educational activities for participants new to OEM as well as for the experienced professional.

ACCE Accreditation Statement
“The American College of Occupational and Environmental Medicine is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.”

AMA Credit Designation Statement
“The American College of Occupational and Environmental Medicine designates this live activity for a maximum of 25.0 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.”

AAFP
Application for credit has been submitted to the American Academy of Family Physicians.

ABOHN
The American Board of Occupational Health Nurses may recognize AMA PRA Category 1 Credits™ as applicable for the education requirements for certification by the ABOHN.

ABPM
ABPM – The majority of AOHC sessions are eligible for ABPM MOC credit toward recertification with the American Board of Preventive Medicine. Those sessions are identified by "MOC.” The maximum number of ABPM MOC credits available for this educational activity is 25.0 and the course code is 1391.

ABPM Patient Safety Requirement Sessions
The program was reviewed to identify sessions that met the ABPM patient safety requirement. The following sessions have been approved: 108, 215, 222, 303, 308, 310, 312.

Doctors of Osteopathy
This conference may be eligible for Category 2-A credit from the American Osteopathic Association.

Physician Assistants
AAPA accepts certificates of participation for educational activities certified for AMA PRA Category 1 Credit™ from organizations accredited by ACCME or a recognized state medical society. Physician assistants may receive a maximum of 25.0 hours of credit for completing this program.

2017 AOHC Distance Learning Activity – More CME!
Earn credit for sessions that you were unable to attend in person at this year’s conference by completing the 2017 AOHC Distance Learning Activity. This activity will be available in summer 2017 and will require purchase and use of the AOHC 2017 conference recordings. Additional fees apply for credit requested.

Disclaimer
The ideas represented in presentations at AOHC 2017 do not necessarily reflect ACOEM positions. ACOEM disclaims responsibility or liability for all products, services, or information presented at AOHC 2017. ACOEM does not endorse any product or service exhibited, nor necessarily support the content contained in the educational offerings.

Disclosure Policy
As a provider accredited by the ACCME, ACOEM must ensure balance, independence, objectivity, and scientific rigor in all of its educational activities. In accordance with the Accreditation Council for Continuing Medical Education’s Standards for Commercial Support, all CME providers are required to disclose to the activity audience the relevant financial relationships of the planners, teachers, and authors involved in the development of CME content. An individual has a relevant financial relationship if he or she has a financial relationship in any amount occurring in the last 12 months with a commercial interest whose products or services are discussed in the CME activity content over which the individual has control. In the case of an individual for whom a conflict cannot be resolved, that individual shall not participate in the development or presentation of the CME activity.

Handouts
All handouts submitted by speakers as of March 27, 2017, will be available to conference attendees via a secured area of ACOEM’s web site two weeks before and two weeks after the meeting. Registrants will be able to access the site, allowing them to view and print all or any of the submitted handouts.

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GENERAL CONFERENCE INFORMATION

Coming Soon!
The AOHC App!

_We’ll let you know as soon as it becomes available. The app will be your go-to source for the latest conference information._

SESSION INFORMATION

AOHC Poster Presentations and Display
Individual Scientific Abstracts and Resident posters will be on display for viewing beginning Sunday, April 23 inside the ACOEM Exhibit Hall. Poster authors will be available to discuss their research with attendees on April 23 from 4:00pm–5:45pm.

Sessions
AOHC sessions offer focused presentations that cover critically chosen, cutting-edge subjects related to OEM competencies. Sessions are designed for OEM physicians and related professionals who practice in a variety of work settings.

Sessions are identified by tracks. The tracks are:
- OEM Clinical Practice
- Management and Administration in OEM
- OEM Education and Scientific Research
- Environmental Health and Risk Management
- Regulatory, Legal, Military, and Governmental OEM Practice

To help in assigning room capacities, please indicate your session preference by time slot on the registration form. This preference does not guarantee a seat in the session. Seating is on a first-come, first-served basis.

AOHC Opening Session
The C. O. Sappington Memorial Lecture serves as a forum from which to address major issues in the field of OEM and will take place during the opening session. Highlights will also include the ACOEM Fellow elevation ceremony.

Worksite Visits
Worksite visits are open to registered attendees only and are considered to be educational activities and not social events or tours. An additional non-refundable fee and advance registration is required.

Please note that worksite visits are non-refundable, non-transferable activities.

Please see the session descriptions and registration form for worksite visit details.

Resident-Friendly Sessions
The following sessions may be of particular interest to residents:
- Sunday: 101, 102, 103, 106, 110
- Monday: 203, 210, 211, 219, 225, 228
- Tuesday: 311, 317
- Wednesday: 403

ABPM Patient Safety Requirement Sessions
The program is currently under review to identify sessions which met the ABPM patient safety requirements.

Learning Resources
We know you can’t be in two places at once, but that doesn’t mean you have to miss out on content. Most sessions will be recorded for sale and orders can be placed on-site and after AOHC. Purchase the online library of conference recordings NOW with your registration and save! For only $129 you will have online access to all recorded sessions! Special advance price is for online library access; other versions such as MP3, CD, or DVD will be available for purchase onsite and following the conference. In addition, after AOHC, a distance learning package will be available for sale that includes CME and MOC credit. The distance learning package will require purchase of the conference recordings, and by buying them now at the special advance price, you’ll be on your way to those hours of additional credit.

Speaker Designation
Speakers who are members of ACOEM are indicated with an asterisk (*) throughout this program. The College would like to take this opportunity to recognize their contributions to ACOEM.

Pre- and Post-Conference Courses
Pre- and post-conference courses are designed to enrich participants’ understanding of concepts and issues related to OEM, giving physicians the knowledge necessary to sustain a competitive edge. Content is driven by research, the latest in regulatory issues, and the expertise of the faculty. Pre-registration is strongly encouraged; a separate registration fee is required.

EXAM OPPORTUNITIES

ABPM Maintenance of Certification (MOC) Exam
The American Board of Preventive Medicine (ABPM) will hold an MOC examination in Denver, CO on Sunday morning, April 23. For more information or to register for the examination, visit the ABPM web site (www.theabpm.org) or call their office at 312-939-2276.

MRO Certification Exam
The Medical Review Officer Certification Council (MROCC) will hold an examination in Denver, CO on Sunday morning, April 23. For information or to register for the examination, call MROCC at 847-631-0599 or visit www.mrocc.org.

EXHIBIT HALL
ACOEM wishes to thank the AOHC 2017 exhibitors and acknowledge their part in contributing to the success of the conference. Attendees are invited to visit the exhibit hall during the following hours:

Sunday, April 23, 2017
4:00 pm–5:45 pm
Exhibit Hall Opening and Reception and Abstract Poster Presentations

Monday, April 24, 2017
8:00 am–5:00 pm
Complimentary Lunch in the Exhibit Hall (12 Noon)

Tuesday, April 25, 2017
8:00 am–3:30 pm

GENERAL CONFERENCE INFORMATION

AOHC Exhibitors (as of November 22, 2016):
- Benson Medical Instruments Co.
- Concentra
- Corporate Health Resources, Inc.
- DocuTAP
- H-Wave
- InfoTech Inc.
- Kaiser Permanente/The Permanente Medical Group, Inc.
- Medlock Consulting
- Net Health
- Nova Medical
- OEM Health Information, Inc.
- OHD, Inc.
- Oxford Immunotec
- Premise Health
- Psychemedics Corp
- SafeLane Health, Inc.
- Select Medical
- TSI Inc.
- VaxServe
- VISTA Staffing Solutions
- Wolters Kluwer
- Zoll Medical Corporation

AOHC’s exhibitors offer attendees the opportunity to learn about the latest developments in scientific research, pharmaceuticals, equipment, supplies, and medical technology. Time spent in the exhibit hall is as rewarding as attendance at a lecture. Only paid AOHC registrants or paid guest registrants with AOHC badges will be permitted in the exhibit hall.

In fairness to those who have rented exhibit space, it is not permitted to have recruiting devices such as posters, business cards, private hospital-suite suites, or any other recruiting medium in use during AOHC except by those who are officially listed as exhibitors. Employment agencies and their employees or representatives who wish to enter into recruitment efforts at AOHC may contact Melanie Stanton at mstanton@acoem.org or by calling 847-818-1800 ext. 306.

ATTIRE
Recommended conference attire is business or business casual. Hotel and meeting room temperatures will vary, so layers are recommended for personal comfort.

VISITOR INFORMATION
For more information on Denver, go to www.denver.org/aohc2017
And go to the AOHC web page for additional links and local information.

TRAVEL TO DENVER
Travelers to Denver may choose to fly into Denver International Airport. www.flydenver.com.

TWEET TWEET! AOHC and Twitter
ACOEM will be using Twitter to communicate late-breaking news and announcements regarding AOHC activities. It’s easy to follow what’s happening at AOHC by simply following this link – http://twitter.com/aohc. You can also receive these updates via RSS feeds, SMS text messages using your cell phone, or e-mail.

REGISTRATION INFORMATION
Registration is required for all persons attending the Conference, worksite visits, or other educational or social activities. Government employees must include a purchase order with the registration form if payment is to be made by the government.

Pricing and Payment
Please see registration form for pricing.

Payment of registration fees must accompany the registration form. The registration form and appropriate fees should be mailed or faxed to:

CHECK:
ACOEM Lockbox
39032 Eagle Way
Chicago, Illinois 60678-1390

CREDIT CARD:
Fax to ACOEM at 847-818-9265.

Attendees may register on line at www.acoem.org by using VISA, MasterCard, American Express, or Discover for payment of registration fees. When paying by credit card, all pertinent information (card number, name of cardholder, expiration date) must be included on the registration form. If paying by company check, make sure the form and payment are sent together. Registrations received without payment will not be processed.

Conference Cancellations/Changes
Cancellation requests must be received in writing by March 27, 2017. Notification by telephone will not be accepted. A refund will be issued minus an administrative fee of $50. No refunds will be issued for cancellation requests received after March 27, 2017.
**GENERAL CONFERENCE INFORMATION**

**Pre- and Post-Conference Courses**
Cancellations/Changes
Cancellation requests must be received in writing by March 27, 2017. Notification by telephone will not be accepted. A refund will be issued minus an administrative fee of $50 (plus $95 for the syllabus, if already shipped; the syllabus is not returnable and is yours to keep). No refunds will be issued for cancellation requests received after March 27, 2017.

Requests to change from one event to another must be received in writing no later than March 27, 2017. Notification by phone will not be accepted. Accommodations to these requests will be made on a space-available basis.

**Pre-registration Deadline**
The deadline for pre-registration is March 27, 2017. Fees will increase after this date.

**On-site Registration Information/Name Badges**
The AOHC Registration Desk will be located at the Sheraton Denver Downtown Hotel. The registration desk will be open the following hours for pickup of conference badges, class schedules, conference materials, and additional registration and conference information. Name badges are required for admittance to all AOHC events.

**Guest Tickets**
A registered attendee may purchase a ticket for a personal guest by stopping by the on-site AOHC registration desk or on the pre-registration form. Please note: business colleagues, friends, and family members will not be allowed to enter educational offerings or session rooms without the advance arrangement of AOHC management.

**Emergency Contact**
Please be sure to indicate your emergency contact information with your registration.

**ACOEM Federal ID#**
The federal employers identification number (FEIN) for ACOEM is 36-3593614. Some attendees may need this information when requesting funds for payment of conference fees from their employer.

**Special Needs – ADA**
AOHC complies with the Americans with Disabilities Act. Please contact us if you have a disability and/or to inform us of any dietary restrictions.

**Consent to Use Photographic Images**
Registration and attendance at, or participation in, ACOEM meetings and other activities constitutes an agreement by the registrant to ACOEM’s use and distribution, both now and in the future, of the registrant, or attendee’s image or voice in photographs, videotapes, electronic reproductions and audio tapes of such events and activities.

**Registrant Mailing List**
Exhibitors are an important part of the conference experience. Even if you don’t use particular exhibitors’ products, their participation supports necessary conference costs which helps offset your registration fee and allows ACOEM to provide a better conference experience for you.

The main benefit for exhibitor participation is access to you – onsite as well as before and after the conference. We provide exhibitors with a list of registrants for their use in contacting you to encourage you to visit their booth. Some offer discounts in their promotional message – another benefit to you. Exhibitors are limited to emailing registrants once before and once after the conference and are not allowed to add your information to their contact database for use beyond AOHC 2017.

We appreciate your understanding and support of this common conference practice. If you prefer to have your name removed from the list provided to exhibitors, you may opt out during the registration process. In addition, just prior to the conference, we will make available to conference registrants only, a list of those who are attending – name and company, no address or contact information will be shared. This is a popular feature and facilitates the all-important networking that is so valuable at AOHC.

Please mark your exhibitor mailing preference on the registration form.

**CONTACT INFORMATION**

**ACOEM Headquarters**
25 Northwest Point Blvd., Suite 700
Elk Grove Village, IL 60007
Telephone: 847-818-1800
Fax (Registration): 847-818-9265
E-mail: registration@acoem.org

**Conference Management**
Joyce Paschall, CAE, CMP, Director of Education
E-mail: jpaschall@acoem.org
Telephone: 847-818-1800 ext. 367

Mary Lunn, Conference Coordinator
E-mail: mlunn@acoem.org
Telephone: 847-818-1800 ext. 393

Melanie Stanton, Exhibits Coordinator
E-mail: mstanton@acoem.org
Telephone: 847-818-1800 ext. 306
### 2017 AOHC REGISTRATION FORM

Register Online at www.acoem.org

**Registration Form**

Name (First M.I. Last)

Employer Name

Address (No P.O. boxes, please)

City

State/Province

Postal Code

Area Code

Telephone

Nickname (for badge)

E-mail Address

#### Conference Registration: Sunday, April 23 – Wednesday, April 26, 2017

<table>
<thead>
<tr>
<th>Registration Status</th>
<th>ACOEM Member</th>
<th>Non-Member</th>
<th>Retired/ Resident/ Student Member</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACOEM Member</td>
<td></td>
<td></td>
<td></td>
<td>$895</td>
</tr>
<tr>
<td>Non-Member</td>
<td></td>
<td></td>
<td></td>
<td>$1195</td>
</tr>
<tr>
<td>Retired/ Resident/ Student Member</td>
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<td></td>
<td>$375</td>
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<tr>
<td>ACOEM Past President</td>
<td></td>
<td></td>
<td></td>
<td>$</td>
</tr>
</tbody>
</table>

Full Conference Registration April 23-26, 2017

Includes: Concurrent Sessions, General Sessions, Membership Breakfast/Meeting and access to Exhibit Hall

$895 $1195 $375 $495/2-days

One-Day Registration Options

Choose Day:

- Sun, April 23
- Mon, April 24
- Wed, April 26

$295/day $705/2-days

Two-Day Registration Options

Choose Two Consecutive Days:

- Sun, April 23
- Mon, April 24
- Wed, April 26

$505/2-days $275/2-days

#### Session Seating – Please indicate session preference to help us in assigning the appropriate room size. Your selections below do not guarantee you a seat in that session.

**Session Seating Schedule**

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Session</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sun., April 23</td>
<td>7:00AM-8:00AM</td>
<td>☐ 099</td>
</tr>
<tr>
<td></td>
<td>9:00AM-10:30AM</td>
<td>☐ 102</td>
</tr>
<tr>
<td></td>
<td>9:00AM-12:15PM</td>
<td>☐ 101 (for newcomers only)</td>
</tr>
<tr>
<td></td>
<td>10:45AM-12:15PM</td>
<td>☐ 105</td>
</tr>
<tr>
<td></td>
<td>1:30PM-2:30PM</td>
<td>☐ 108</td>
</tr>
<tr>
<td></td>
<td>2:45PM-3:45PM</td>
<td>☐ 110</td>
</tr>
<tr>
<td></td>
<td>4:00PM-5:45PM</td>
<td>☐ 111</td>
</tr>
<tr>
<td></td>
<td>6:00PM-7:30PM</td>
<td>☐ 100 AOHC Opening Session: Sappington Lecture</td>
</tr>
<tr>
<td>Mon., April 24</td>
<td>7:00AM-8:00AM</td>
<td>☐ 200</td>
</tr>
<tr>
<td></td>
<td>8:30AM-10:00AM</td>
<td>☐ 206</td>
</tr>
<tr>
<td></td>
<td>8:30AM-12:00PM</td>
<td>☐ 210</td>
</tr>
<tr>
<td></td>
<td>10:30AM-12:00PM</td>
<td>☐ 212</td>
</tr>
<tr>
<td></td>
<td>10:30AM-3:00PM</td>
<td>☐ 215</td>
</tr>
<tr>
<td></td>
<td>1:30PM-3:00PM</td>
<td>☐ 216</td>
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<tr>
<td></td>
<td>3:30PM-5:00PM</td>
<td>☐ 221</td>
</tr>
<tr>
<td></td>
<td>5:15PM-6:15PM</td>
<td>☐ 227</td>
</tr>
<tr>
<td>Tues., April 25</td>
<td>8:30AM-10:00AM</td>
<td>☐ 301</td>
</tr>
<tr>
<td></td>
<td>8:30AM-12:00PM</td>
<td>☐ 304</td>
</tr>
<tr>
<td></td>
<td>10:30AM-12:00PM</td>
<td>☐ 306</td>
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<tr>
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<td>1:30PM-3:00PM</td>
<td>☐ 309</td>
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<tr>
<td></td>
<td>1:30PM-5:00PM</td>
<td>☐ 312</td>
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<tr>
<td></td>
<td>3:30PM-5:00PM</td>
<td>☐ 314</td>
</tr>
<tr>
<td></td>
<td>5:15PM-6:15PM</td>
<td>☐ 317</td>
</tr>
<tr>
<td>Wed., April 26</td>
<td>7:00AM-8:00AM</td>
<td>☐ 401</td>
</tr>
<tr>
<td></td>
<td>8:00AM-10:00AM</td>
<td>☐ 404</td>
</tr>
<tr>
<td></td>
<td>10:15AM-11:15AM</td>
<td>☐ 406</td>
</tr>
</tbody>
</table>

After March 27: All conference registration fees will increase by $100.

☐ Check here if you have a disability requiring special services and/or to indicate dietary restrictions, including food allergies and intolerances (please attach details or explain below) or email aohcservices@acoem.org:

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

EMERGENCY CONTACT DURING CONFERENCE:

Name: ____________________________

Phone: ____________________________

This registration form is 2 pages. Please complete and return both pages!

$_________ Subtotal – Page 1
### Additional Fees and Ticketed Events

<table>
<thead>
<tr>
<th>Date</th>
<th>Event Description</th>
<th>Fee</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sunday, April 23</td>
<td>Yes! I plan to attend the Exhibit Hall Opening Reception** (Guest Ticket: $60 each)</td>
<td>$0 (Guest: $60)</td>
<td></td>
</tr>
<tr>
<td>Monday, April 24</td>
<td>Yes! I would like the complimentary lunch in the exhibit hall**</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td>Monday, April 24</td>
<td>Yes! I plan to attend the Offsite Social Event** (Guest Ticket: $60 each)</td>
<td>$0 (Guest: $60)</td>
<td></td>
</tr>
<tr>
<td>Tuesday, April 25</td>
<td>Worksite Visit #801: Denver Fire Department Academy (This is a non-refundable event).</td>
<td>$85</td>
<td></td>
</tr>
<tr>
<td>Wednesday, April 26</td>
<td>Yes! I plan to attend the Membership Meeting and Breakfast** (Guest Ticket: $45 each)</td>
<td>$0 (Guest: $45)</td>
<td></td>
</tr>
</tbody>
</table>

### Other Conference Options

<table>
<thead>
<tr>
<th>Date</th>
<th>Event Description</th>
<th>Fee</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sunday, April 23</td>
<td>Session 101: Introduction to OEM – for newcomers to Occ Med only</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td>Exhibitor Mailing Options</td>
<td>I will allow my email address to be used by exhibitors for one email pre-and one email post-conference (per exhibitor)</td>
<td>Please check your exhibitor mailing preferences at left</td>
<td></td>
</tr>
<tr>
<td>Monday, April 24</td>
<td>Additional Fees and Ticketed Events</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exhbitors Mailing Options</td>
<td>I will allow my email address to be used by exhibitors for one email pre-and one email post-conference (per exhibitor)</td>
<td>Please check your exhibitor mailing preferences at left</td>
<td></td>
</tr>
<tr>
<td>Special Advance Price</td>
<td>Pre-purchase online library of conference recordings now and save over on-site and post-conference prices! (Post-conference CME will be sold separately in summer 2017)</td>
<td>$129</td>
<td></td>
</tr>
</tbody>
</table>

### Pre-conference Courses

<table>
<thead>
<tr>
<th>Date</th>
<th>Event Description</th>
<th>Fee</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Friday, April 21</td>
<td>Medical Center Occupational Health Basics</td>
<td>ACOEM Member: $365</td>
<td></td>
</tr>
<tr>
<td>Saturday, April 22</td>
<td>Business Leadership for Physicians: Necessary Knowledge Not Taught in Medical School</td>
<td>ACOEM Member: $365</td>
<td></td>
</tr>
<tr>
<td>Friday-Saturday, April 21-22 (two-day courses)</td>
<td>Medical Review Officer (MRO) Comprehensive</td>
<td>ACOEM Member: $695</td>
<td></td>
</tr>
<tr>
<td>Thursday, April 27, 2017</td>
<td>Spirometry Testing in Occupational Health – Physician Update</td>
<td>ACOEM Member: $365</td>
<td></td>
</tr>
<tr>
<td>Thursday, April 27, 2017</td>
<td>CAOHC Professional Supervisor Workshop</td>
<td>ACOEM Member: $365</td>
<td></td>
</tr>
<tr>
<td>Thursday, April 27, 2017</td>
<td>Getting Difficult Cases Unstuck: Tactics for Stalled Recovery and Prolonged Work Disability: A Case-Based Approach</td>
<td>ACOEM Member: $365</td>
<td></td>
</tr>
</tbody>
</table>

**CONFERENCE AND PRE-POST COURSE CANCELLATIONS/CHANGES**

Cancellation requests must be received in writing on or before March 27, 2017. For conference registrations, a refund will be issued minus an administrative fee of $50. For course registrations, a refund will be issued minus an administrative fee of $50, plus $95 for the course syllabus (if already shipped; the syllabus is not returnable). No refunds will be issued for cancellation requests received after March 27, 2017. Requests to change from one event to another must be received in writing on or before March 27, 2017. Accommodations to these requests will be made on a space-available basis. Notification by phone will not be accepted for cancellations or changes. Refunds will not be given for any worksite visit fees, regardless of when the cancellation request is made.

- I have read and understand the above Conference and Pre-Post Course Cancellations/Changes policy.

**PAYMENT:**

- Check enclosed Payable to ACOEM (US Funds Only)
- American Express
- Discover
- Master Card
- VISA

Credit Card #: __________________________ Exp. Date: __________ Signature: __________________________

---

Return both pages of this form with payment to:
CHECK: ACOEM Lockbox, 39032 Eagle Way, Chicago, Illinois 60678-1390
CREDIT CARD: Fax to ACOEM at 847/818-9265

Registrations received without payment will not be processed. Please call 847/818-1800, ext. 374 with any questions. **We understand that not everyone will be able to attend due to other obligations. Therefore, if you would like to attend this event, please indicate so on the registration form. This will assist us in ordering the proper amount of food and eliminating unnecessary waste.**
April 23-26, 2017

AOHC DENVER
American Occupational Health Conference